Small molecule-mediated insulin hypersecretion induces transient unfolded protein response and loss of beta cell function

Short title: Transient ER stress response in beta cells

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ABSTRACT:

Pancreatic islet beta cells require a fine-tuned ER stress response for normal function; abnormal ER stress contributes to diabetes pathogenesis. Here, we identified a small molecule, SW016789, with time-dependent effects on beta cell ER stress and function. Acute treatment with SW016789 potentiated nutrient-induced calcium influx and insulin secretion, while chronic exposure to SW016789 transiently induced ER stress and shut down secretory function in a reversible manner. Distinct from the effects of thapsigargin, SW016789 did not affect beta cell viability or apoptosis, potentially due to a rapid induction of adaptive genes, weak signaling through the eIF2α kinase PERK, and lack of oxidative stress gene *Txnip* induction. We determined that SW016789 acted upstream of voltage-dependent calcium channels (VDCCs) and potentiated nutrient- but not KCl-stimulated calcium influx. Measurements of metabolomics, oxygen consumption rate, and G protein-coupled receptor signaling did not explain the potentiating effects of SW016789. In

chemical co-treatment experiments we discovered synergy between SW016789 and activators of protein kinase C (PKC) and VDCCs, suggesting involvement of these pathways in the mechanism of action. Finally, chronically elevated calcium influx was required for the inhibitory impact of SW016789, as blockade of VDCCs protected human islets and MIN6 beta cells from hypersecretion-induced dysfunction. We conclude that beta cells undergoing this type of pharmacological hypersecretion have the capacity to suppress their function to mitigate ER stress and avoid apoptosis. These results have the potential to uncover beta cell ER stress mitigation factors and add support to beta cell rest strategies to preserve function.

INTRODUCTION

Pancreatic islet beta cells sense and control circulating glucose concentrations by secreting insulin. In type 1 diabetes (T1D), autoimmune attack on beta cells results in their death and thus a lack of insulin. In type 2 diabetes (T2D), beta cells initially compensate for insulin resistance but eventually fail to secrete sufficient insulin to maintain euglycemia [1]. Interventions are aimed at restoring beta cell functionality, lowering insulin resistance, and reducing hyperglycemia. However, existing therapeutics have limitations, necessitating identification of new targets and pathways.

Beta cells sense elevated circulating blood glucose concentrations via the glucose transporters GLUT1/3 [2]. Upon cellular entry, glucose metabolism via glycolysis and the tricarboxylic acid cycle yields a relative increase in [ATP/ADP], causing ATP-sensitive potassium (K_{ATP}) channel closure. This closure reduces the plasma membrane permeability to potassium, causing membrane depolarization, opening of voltage-dependent Ca^{2+} channels (VDCCs) and Ca^{2+} influx [3]. Ca^{2+} influx also stimulates oxidative phosphorylation in the mitochondria, driving a metabolic cycle that sustains ATP production and insulin secretion [4, 5]. Ca^{2+} influx triggers the fusion of insulin secretory vesicles with the plasma membrane resulting in insulin exocytosis [6]. Nutrient metabolism further enhances secretion without further Ca^{2+} influx via the amplifying pathway [7-9]. To handle their specialized secretory function, beta cells engage the unfolded protein response of the endoplasmic reticulum (UPR^{ER}) [10]. The UPR^{ER} is crucial in beta cells, as its disruption (e.g., PERK loss-of-function) leads to beta cell failure and diabetes [11]. Conversely, unmitigated UPR^{ER} is also detrimental to beta cell function and survival, eventually leading to induction of pro-apoptotic transcription factors including *Ddit3* (CHOP) and *Txnip* [12, 13].

Many studies have elucidated aspects of beta cell biology that may be targeted to improve overall beta cell health and function, including the UPR[ER], beta cell dedifferentiation, and the role of immature beta cells in whole islet function [14-18]. However, the high-throughput identification of novel small molecules that alter pancreatic beta cell function has lagged in comparison. Here, we used a secreted insulin-luciferase-based high-throughput screening tool to identify a small molecule, SW016789, which acutely and chronically alters beta cell secretory responses [19, 20]. We hypothesized the chronic effects on function were a result of acute hypersecretion which induced stress pathways (e.g., ER stress) that led to a shutdown of beta cell function, but not beta cell death. We investigated the mechanisms of action of SW016789 using a multipronged approach including measuring Ca^{2+} influx and insulin secretion; metabolomics and mitochondrial function; gene expression; and co-treatment with compounds that may interfere with the effects of SW016789. Our results with SW016789 agree with a model of beta cell plasticity wherein the effects of persistent secretory stress are mitigated to avoid cell death at the expense of function. Chemical tools like SW016789 present an opportunity to discover previously unrecognized or poorly characterized genes and pathways involved in these processes in the beta cell.

METHODS:

Antibodies and Reagents – Source information for all small molecules and antibodies used in this work are listed in electronic supplementary material (ESM) **Table S4**.

Small molecule screening –High-throughput screening of small molecules in Ins-GLuc MIN6 cells was as described [21]. Briefly, cells were seeded at ~15e6 cells per T175 flask and grown 7 days until confluence, then trypsinized, resuspended in medium, passed through a 40 μm cell strainer and diluted to 1.5e6 cells/ml. Cells were dispensed at 50 μl per well in 384-well opaque white cell culture dishes using a BioTek Multiflo FX liquid handler to yield 7.5e4 cells/well. Plates were placed in a tissue culture incubator for 72 h. Next, 0.5 μl each of DMSO (negative control, 1%), thapsigargin (positive control, 1 mM), and small molecules (5 μM) were added robotically to the plates and the cells were incubated 24 h. On the day of the assay, using a BioTek Multiflo FX liquid handler, cells were washed twice with KRBH (75 μL then 50 μL). To remove medium and buffer between washes, plates were centrifuged upside-down in collection trays at 30 x g for 1 min. Cells were then incubated in 25 μl of KRBH containing 200 mM diazoxide for 60 min. Next, 25 μl of 2X stimulation buffer in KBRH was added to yield a final concentration of 20 mM glucose, 35 mM KCl and 250 mM diazoxide in a total volume of 50 μl. The plates were incubated for 60 min

at 37°C in a tissue culture incubator. Afterward, 20 µl of GLuc assay working solution (5 mM KCl, 15 mM Hepes pH 7.4, 24 mM NaHCO3, 1 mM MgCl2, 2 mM CaCl2, 300 mM sodium ascorbate, and 3.54 µM coelenterazine) was added to each well. Within 10-20 min, the luminescence from each well of the plates was measured using a Perkin Elmer EnVision multi-mode plate reader with 0.1 sec integration time. The raw data were corrected for plate effects using a GeneData proprietary algorithm and then each value on a per plate basis was subjected to either single-point or two-point normalization, followed by calculation of the robust Z (RZ) score for each well. Hit compounds with an |RZ|>3 were selected for structural clustering analysis. Representative compounds were then cherry picked and confirmed in triplicate in the same InsGLuc-MIN6 secretion assay and tested for toxicity in MIN6 cells by Cell Titer Glo assay after 72 h exposure.

Cell culture and treatments – Culture of MIN6 beta cells has been described [20]. MIN6 cells were cultured in high glucose DMEM containing 10% FBS, 50 µM beta-mercaptoethanol, 1 mM pyruvate, 100 U/ml penicillin, and 100 µg/ml streptomycin. Prior to glucose stimulation experiments (as in **Fig. 3a-d**), cells were washed twice with and incubated for 2 h in freshly prepared glucose-free modified Krebs-Ringer bicarbonate (KRBH) buffer (5 mM KCl, 120 mM NaCl, 15 mM HEPES, pH 7.4, 24 mM NaHCO$_3$, 1 mM MgCl$_2$, 2 mM CaCl$_2$, and 1 mg/ml radioimmunoassay-grade BSA). MIN6 cells were stimulated with glucose as indicated and secreted insulin and insulin content were measured using HTRF assays (Cisbio). To generate lysates for immunoblotting, cells were lysed in 1% NP40 lysis buffer (25 mM HEPES, pH 7.4, 1% Nonidet P-40, 10% glycerol, 137 mM NaCl, 1 mM EDTA, 1 mM EGTA, 50 mM sodium fluoride, 10 mM sodium pyrophosphate, 1 mM sodium orthovanadate, 1 mM phenylmethylsulfonyl fluoride, 10 µg/ml aprotinin, 1 µg/ml pepstatin, 5 µg/ml leupeptin), rotated (10 min, 4°C), centrifuged (10,000 x g; 10 min; 4°C), and stored at -80°C. InsGLuc-MIN6 cells were generated and characterized as previously described [20] and were determined to be negative for mycoplasma. Mouse intestinal L cell line GLUTag was originally generated by Daniel Drucker (Mount Sinai Hospital) and were obtained from the lab of George G. Holz (Upstate Medical University). GLUTag cells were cultured in low glucose DMEM with 10% FBS and 100 U/ml penicillin, 100 µg/ml streptomycin. The human somatostatinoma line QGP-1 was provided by Dawn E. Quelle (University of Iowa). QGP-1 cells were cultured in RPMI-1640 with 10% FBS, 1 mM pyruvate, 100 U/ml penicillin, and 100 µg/ml streptomycin. GLUTag and QGP-1 cells were plated in 12 well dishes and treated in medium as indicated in the figure legend before harvesting for RNA purification and downstream gene expression analysis.

Secreted Gaussia luciferase assays – InsGLuc-MIN6 cells were plated in 96-well dishes at 1e5 cells/well and cultured for 3-4 days before compound treatment either overnight (24 h) in medium or acutely (1 h) in KRBH. Treatments in 96-well assays were performed with at least three replicate wells and in at least three independent passages of cells. For assays, cells were washed twice with KRBH and preincubated in 100 µl of KRBH (250 µM diazoxide where indicated) for 1 h. The solution was then removed, and cells were washed once with 100 µl of KRBH and then incubated in KRBH with or without the indicated stimulation and compound treatments for 1 h. 50 µl of KRBH was collected from each well and pipetted into a white opaque 96-well plate Optiplate-96 (Perkin-Elmer). Fresh GLuc assay working solution was then prepared by adding coelenterazine stock solution into assay buffer to a final concentration of 10 µM. 50 µl of working solution was then rapidly added to the wells using an Integra Voyager 1250 µl electric multi-channel pipette for a final concentration of 5 µM coelenterazine. After adding reagent to the plate, plates were spun briefly, and luminescence was measured on a Synergy H1M2 plate reader (BioTek). The Gen5 software protocol was set to shake the plate orbitally for 3 seconds and then read the luminescence of each well (integration, 100 ms; gain,150).

Human islet culture, drug treatments and static culture secretion assays – Cadaveric human islets were obtained through the Integrated Islet Distribution Program (IIDP). Islets were isolated by the affiliated islet isolation center and cultured in PIM medium (PIM-R001GMP, Prodo Labs) supplemented with glutamine/glutathione (PIM-G001GMP, Prodo Labs), 5% Human AB serum (100512, Gemini Bio Products), and ciprofloxacin (61-277RG, Cellgro, Inc) at 37°C and 5% CO2 until shipping at 4°C overnight. Human islets were cultured upon receipt in complete CMRL-1066 (10% FBS, 100 U/ml penicillin, 100 µg/ml streptomycin). For drug treatments and static culture, human islets (50-75) were hand-picked under a dissection microscope and transferred to low-binding 1.5 ml tubes (50 islets/tube). Islets were cultured 24 h in 500 µL of complete CMRL-1066 medium containing indicated drug treatments. For static culture insulin secretion experiments, the islets were washed twice with 500 µL of KRBH (134 mM NaCl, 4.8 mM KCl, 1 mM $CaCl_2$, 1.2 mM $MgSO_4$, 1.2 mM KH_2PO_4, 5 mM $NaHCO_3$, 10 mM HEPES pH 7.4, 0.1% radioimmunoassay-grade BSA) and preincubated in KRBH (500 µL, 1 mM glucose; 1 h) before switching to 500µL KRBH containing either 1 or 16 mM glucose for 1 h. Supernatants were collected, centrifuged (10,000 x g; 5 min) and transferred to fresh tubes for storage at -80°C. Total insulin content was extracted by acid-ethanol (1.5% HCl in 70% ethanol) overnight at -80°C and the solution was neutralized

with an equal volume of 1 M Tris pH 7.4 prior to insulin assays. Secreted insulin and insulin

content were measured using HTRF assays. Human islet characteristics and donor information

are listed in **ESM Human Islet Checklist**.

Cell death and viability assays – To measure live and dead cells as well as the live/dead cell

ratio, MultiTox-Fluor (Promega) was used according to the manufacturer's instructions. Briefly,

MIN6 cells were seeded into 96 well black-walled clear bottom tissue culture dishes at 5e4-1e5

cells/well and culture for 3-5 d before treatment with compounds as indicated in the figure legend.

On the day of the assay, cell-permeant GF-AFC substrate (live cell readout) and cell-impermeant

bis-AAF-R110 substrate (dead cell readout) reagents were diluted into kit assay buffer as a 2X

working solution. 100 µL of 2X working solution was added to each well of cells in 100 µL of

medium and incubated 30 min at 37°C. Plates were read on a BioTek Synergy H1M2 plate reader

($400_{Ex}/505_{Em}$ for live cells; $485_{Ex}/520_{Em}$ for dead cells). Digitonin was a positive control for cell

death which lysed cells immediately prior to addition of 2X working solution. Viability and death

were normalized to DMSO control.

Ca^{2+} influx assays – Ca^{2+} influx measurements were completed in MIN6 cells plated in triplicate

in black-walled clear-bottom 96-well tissue culture imaging plates. Cells were preincubated for 1 h

in glucose-free KRBH, followed by loading with Fura-2-LR-AM (5 µM) for 25 min and a 5 min

washout. Using a BioTek Synergy H1 plate reader equipped with dual monochromators, relative

Ca^{2+} levels were measured ($Ex_{340/380}/Em_{510}$ gain=150). Recordings included 5 min baseline

followed by 5-30 min post-addition of stimulation as indicated. Data were normalized by

subtracting the mean of the respective baseline reads. Area under the curves (AUCs) were

calculated from peaks detected in GraphPad Prism using a baseline of 0 ΔRFU, restricted to

peaks that go above baseline by more than 0.05 ΔRFU and defined by at least 10 adjacent points.

Immunoblotting – 40-50 µg of cleared cell lysates were separated on 10% gels by SDS-PAGE

and transferred to nitrocellulose for immunoblotting. All membranes were blocked in Odyssey

blocking buffer (Licor) for 1 h before overnight incubation with primary antibodies diluted in

blocking buffer (**ESM Table 4**). After three 10 min washes in TBS-T (20 mM Tris-HCl pH 7.6, 150

mM NaCl, 0.1% Tween-20), membranes were incubated with fluorescent secondary antibodies for

1 h at room temperature. After three 10 min washes in TBS-T, membranes were imaged on a

Licor Odyssey scanner.

Relative gene expression – RNA was isolated from MIN6 cells using the PureLink RNA Mini Kit
(Life Technologies) or the Aurum Total RNA Mini kit (Bio-Rad). Briefly, after indicated treatments,
medium was removed from cells and lysis buffer (with β-mercaptoethanol) was added to cells.
Cells were scraped, lysates transferred to 1.5 mL tubes on ice and then transferred to -80°C for
storage. Samples were processed according to the kit manufacturer's instructions, including on-
column digestion with RNase-free DNase. RNA concentration was measured using an Implen
Nanophotometer or Nanodrop spectrophotometer and verified to have $A_{260/280}$ ratios >2.0. 1000 ng
of RNA was converted into cDNA using the iScript cDNA synthesis kit (Bio-Rad) following
manufacturer instructions and the resulting cDNA was diluted 20-fold with water. One µl of diluted
cDNA was used in 10 µl qPCR reactions using 2X SYBR Bio-Rad master mix and 250 nM of each
primer. Reactions were run in 384-well format on a CFX384 (Bio-Rad) or QuantStudio 5 (Thermo).
qPCR data was analyzed using CFX Manager (Bio-Rad) with 18S RNA as the reference gene.
Relative expression was calculated by the $2^{-\Delta\Delta Ct}$ method. All primer details are listed in ESM **Table
4.**

Bioenergetics – Oxygen consumption rates were measured using a Seahorse XFe96 (Agilent).
MIN6 cells were seeded at a density of 5e4 cells/well in XF96 cell culture microplates and cultured
for 48 h. On the day before the assay a Seahorse cartridge was hydrated with calibrant solution
and incubated overnight. On the day of the assay, the XFe96 PrepStation was set to 37°C and
hydrated cartridge was placed inside. MIN6 cells were washed twice with Seahorse-modified
Krebs-Ringer HEPES buffer (S-KRH: 5 mM KCl, 114 mM NaCl, 20 mM Hepes pH 7.4, 1.2 mM
$MgSO_4$, 2.5 mM $CaCl_2$, 1.2 mM KH_2PO_4 and pH carefully adjusted to 7.4, BSA and $NaHCO_3$ are
not present) and placed in the PrepStation to equilibrate for 1 h. The hydrated Seahorse cartridge
was placed on an empty utility plate to be loaded with compounds diluted in S-KRH. The drug
cartridge was returned to the utility plate with calibrant solution and inserted into the XFe96 for
calibration. After calibration, the cell culture plate was inserted into the XFe96 and MIN6 cells
were monitored for three 3 min cycles to measure baseline oxygen consumption (OCR) and
extracellular acidification rates (ECAR). Stimulations were injected as indicated and after each
stimulation cells were monitored for three 3 min cycles. Data were analyzed in the Seahorse
WAVE software (version 2.61.53).

Metabolomics – Metabolomic analysis was performed as described [22, 23]. MIN6 cells grown to confluence in 6 well dishes were preincubated in glucose-free KRBH for 2 h at 37°C. DMSO (0.1%), SW016789 (5 μM), and/or glucose (20 mM) were added as indicated and cells were incubated a further 30 min at 37°C. After indicated treatments, cells were washed with 1 ml ice cold saline and harvested in 1 ml of 80% methanol at 80°C. Cells were scraped and transferred to 1.5 ml tubes for three freeze-thaw cycles in liquid nitrogen. Lysates were clarified at 14,000 rpm for 15 min at 4°C. Metabolite containing supernatants were transferred to a new 1.5 ml tube and lyophilized using a SpeedVac. Breathable membranes were placed on top of the open tubes to prevent cross contamination and the SpeedVac was operated without heat for 4 h. Pellets were stored at 80°C prior to analysis by the Metabolomics Facility at Children's Medical Center Research Institute at UT Southwestern (Dallas, TX). Metabolites were reconstituted in 100 ml of 0.03% formic acid in analytical grade water, vortex mixed, and centrifuged to remove debris. Thereafter, the supernatant was transferred to a high-performance liquid chromatography (HPLC) vial for the metabolomics study. Targeted metabolite profiling was performed using a liquid chromatography mass spectrometry/mass spectrometry (LC/MS/MS) approach. Separation was achieved on a Phenomenex Synergi Polar RP HPLC column (150 x 2 mm, 4 μm, 80 Å) using a Nexera Ultra High Performance Liquid Chromatograph (UHPLC) system (Shimadzu Corporation). The mobile phases employed were 0.03% formic acid in water (A) and 0.03% formic acid in acetonitrile (B). The gradient program was as follows: 0-3 min, 100% A; 3-15 min, 100% - 0% A; 15-21 min, 0% A; 21-21.1 min, 0% - 100% A; 21.1-30 min, 100% A. The column was maintained at 35°C and the samples kept in the autosampler at 4°C. The flow rate was 0.5 ml/min, and injection volume 10 μl. The mass spectrometer was an AB QTRAP 5500 (Applied Biosystems SCIEX) with electrospray ionization (ESI) source in multiple reaction monitoring (MRM) mode. Sample analysis was performed in positive/negative switching mode. Declustering potential (DP) and collision energy (CE) were optimized for each metabolite by direct infusion of reference standards using a syringe pump prior to sample analysis. The MRM MS/MS detector conditions were set as follows: curtain gas 30 psi; ion spray voltages 5000 V (positive) and 1500 V (negative); temperature 650°C; ion source gas 150 psi; ion source gas 250 psi; interface heater on; entrance potential 10 V. Dwell time for each transition was set at 3 msec. Samples were analyzed in a randomized order, and MRM data was acquired using Analyst 1.6.1 software (Applied Biosystems SCIEX). Chromatogram review and peak area integration were performed using MultiQuant software version 2.1 (Applied Biosystems SCIEX). Although the numbers of cells were similar and each sample was processed identically and randomly, the peak area for each

detected metabolite was normalized against the protein content of that sample to correct any
variations introduced from sample handling through instrument analysis. The normalized area
values were used as variables for the multivariate and univariate statistical data analysis. The
chromatographically co eluted metabolites with shared MRM transitions were shown in a grouped
format, i.e., leucine/isoleucine. Principle component analysis (PCA) was completed using SIMCA-
P software (version 13.0.1, Umetrics). To generate heat maps, metabolite TIC values were
normalized to the average of 'DMSO Basal' and expressed in $\log_2$. Heatmap was generated using
MetaboAnalyst 5.0 [24] using Euclidean distance with the Ward clustering algorithm, without
autoscaling of the features. Statistical differences were assessed by one-way ANOVA with
Fisher's LSD post-hoc test with an FDR <0.05 in MetaboAnalyst 5.0. Raw TIC values and table of
significantly altered metabolites are provided in **ESM Table 3**.
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269 **Statistical Analysis** – Quantitated data are expressed as mean ± SD. Data were evaluated using
270 one- or two-way ANOVA as indicated and considered significant if P < 0.05. Graphs were made in
271 GraphPad Prism 9 and figures assembled in Affinity Designer (Serif).
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RESULTS

High-throughput screen identifies small molecule modulator of insulin secretion.

In order to discover small molecules that alter beta cell function, we utilized the insulin-
Gaussia luciferase (GLuc) fusion reporter expressed in MIN6 beta cells (InsGLuc-MIN6) [20].
InsGLuc is processed and leads to co-secretion of Gaussia luciferase (GLuc) with insulin.
Secreted GLuc activity in this manner has been well-established as a proxy for insulin release [19,
25-29]. Our approach involved treating InsGLuc-MIN6 beta cells for 24 h with compounds followed
by a brief wash-out prior to testing their sustained impact on insulin secretion. This strategy
probes a distinct phenotypic space and is complementary to results from studies utilizing acute
treatments during stimulation [19]. We screened an 8,320 compound diversity subset
approximately representing the chemical space of the >300,000 compound library at the UT
Southwestern Medical Center High-Throughput Screening Core. InsGLuc-MIN6 beta cells were
treated with control and test compounds for 24 h in normal medium followed by a washout and
stimulation with glucose and KCl in the presence of diazoxide (**Fig. 1a**). Among the hits, chronic
exposure to SW016789 caused inhibition of secretion in InsGLuc-MIN6 cells with an IC_{50} <1 μM
(**Fig. 1b**) and was chosen for further study. Glucose-stimulated InsGLuc secretion was blunted in

MIN6 cells chronically exposed to resupplied stocks of SW016789, validating screening results

(**Fig. 1c**). Chronic pretreatment (24 h) of isolated human islets with SW016789 also impaired

glucose-stimulated insulin secretion (GSIS) (**Fig. 1d,e**), without a significant impact on insulin

content (**Fig. 1f**). SW016789 did not impact cell viability (**Fig. 1g**), cell death (**Fig. 1h**), or the

live/dead cell ratio (**Fig. 1i**) in MIN6 cells treated for up to 72 h. During this time course,

SW016789-treated cells remained unresponsive to stimulation with glucose or KCl (**Fig. 1j**), but

were able to mount significant, although blunted, responses to glucose if combined with

stimulators of cAMP generation or protein kinase C (PKC) activation (**Fig. 1j**). Beta cells exposed

to SW016789 for 24 h recovered function after a 48 h washout (**Fig. 1k**), indicating the effects are

reversible.

SW016789 acutely potentiates nutrient-stimulated insulin secretion

We determined that exposure of InsGLuc-MIN6 cells to SW016789 for 4-8 h resulted in

significant inhibition of GSIS while acute (≤2 h) exposure caused a marked potentiation of GSIS

(EC_{50} = 2.7 µM) (**Fig. 2a, ESM Fig. 1a,b**). Structure-activity relationship studies revealed that

while SW016789 is chiral, both enantiomers retain activity (**ESM Fig. 1c-f**) and the alcohol at the

chiral center is important for activity (**ESM Fig. 1g**). SW016789 potentiated amino acid-induced

secretion (**Fig. 2b**) but had no effect in cells treated with diazoxide and depolarizing KCl (**Fig. 2c**).

However, SW016789 elicited a response from cells treated with diazoxide and glucose without

elevated KCl. These data suggested the pathway activated by SW016789 requires nutrient

metabolism and may impact Ca^{2+} influx. Accordingly, chronic SW016789 treatment suppressed

glucose-stimulated Ca^{2+} influx (GSCa) (**Fig. 3a,b**), and acute SW016789 treatment potentiated

nutrient- but not KCl-stimulated Ca^{2+} influx (**Fig. 3c-f**). Considering these results, we determined

the effects of SW016789 on Ca^{2+} influx in the diazoxide paradigm. Beta cells were either pre-

treated for 24 h or treated with compound simultaneously with stimulation. With chronic

SW016789, stimulation with depolarizing KCl or KCl/glucose caused a rapid and sustained rise in

Ca^{2+} influx which was significantly lower than control by ~40% (**ESM Fig. 2a**), while acute

SW016789 had no impact (**ESM Fig. 2b**). We also observed a slight increase in GSCa even in the

presence of diazoxide and low KCl (**ESM Fig. 2c**), which was consistent with secretion data (**Fig.**

2c).

A potential source of the SW016789-enhanced Ca^{2+} influx is the endoplasmic reticulum

(ER). We tested whether SW016789 impacted ER Ca^{2+} stores or store-operated Ca^{2+} entry

(SOCE). MIN6 beta cells were pre-treated with SW016789 for 2, 6, and 24 h and subjected to

Ca^{2+} assays including thapsigargin stimulation to block SERCA2, leading to an observable Ca^{2+}

leak into the cytosol (**ESM Fig. 2d**). Treatment with SW016789 did not alter this indirect measure

of ER Ca^{2+}. Subsequently, Ca^{2+} was reintroduced to measure SOCE. Pre-exposure to SW016789

for 2-6 h caused a small, but significant, decrease in SOCE, but this effect was absent in cells

treated for 24 h, suggesting that in beta cells exposed to SW016789, ER Ca^{2+} and SOCE

responses were unmodified and may not underlie the acute potentiating or chronic inhibitory

effects of SW016789. Additionally, acute SW016789 exposure did not impact muscarinic receptor-

linked Gαq-stimulated Ca^{2+} influx (**ESM Fig. 2e**).

SW016789 is unlikely to exert its beta cell effects via G protein-coupled receptors

Because of its acute potentiating activity, we considered SW016789 may act through a G

protein-coupled receptors (GPCRs). Acute potentiation of insulin secretion can occur via activation

of Gαs-linked GPCRs and resultant cAMP generation [30]. To monitor relative cAMP production,

we used the BRET reporter CAMYEL stably expressed in MIN6 cells [31]. The positive control

(forskolin+IBMX) caused a marked increase in cAMP, while acute stimulation with SW016789,

with or without glucose, yielded no consistent alterations in signal (**ESM Fig. 3a,b**). To test a wider

range of GPCRs we also submitted SW016789 for screening against the GPCR library at the

NIMH Psychoactive Drug Screening Program at University of North Carolina [32] (**ESM Fig. 3c**).

Overall, SW016789 exhibited little to no activity against the GPCRs in the panel, including well-

known beta cell GPCRs (**ESM Table 1**). Only CXCR7 (ACKR3) out of 320 GPCRs was a

substantial primary hit, however confirmation studies determined the EC_{50} of SW016789 on

CXCR7 was ~26 µM (**ESM Fig. 3d**), well above the EC_{50} for beta cell activity (**Fig. 1b, ESM Fig.**

1a). In line with this result, the CXCR7 agonist VUF11207 [33] had a negligible impact on InsGLuc

secretion during chronic or acute treatments (**ESM Table 2**). These data suggested CXCR7 is

unlikely to mediate the effects of SW016789 in beta cells where its activity is observed in the 1-5

µM range. Together, these data suggested SW016789 does not exhibit substantial off-target

activity on GPCRs and that other mechanisms may be involved in its effects in beta cells.

Beta cell metabolomic and mitochondrial responses are normal following acute SW016789

exposure

Because SW016789 required nutrient co-stimulation to elicit effects on Ca^{2+} influx, we

hypothesized altered metabolism may contribute to the mechanism of action. To test this, we

performed targeted metabolomics on normal MIN6 beta cells stimulated with or without glucose in

the presence of DMSO or SW016789 for 30 min (**Fig. 4a**). The amplifying effect of SW016789 on

GSIS was confirmed by insulin measurements and the cellular extracts were submitted for

metabolomic analysis (**Fig. 4b, ESM Table 3**). Expectedly, glucose induced glycolysis and TCA

intermediates and the reduced/oxidized glutathione ratio (**Fig. 4c,d**). In each of these cases,

SW016789 had no impact. These results suggested SW016789 is unlikely to exert effects by

acutely altering well-known metabolic pathways. Beta cell oxygen consumption rates and

extracellular acidification rates were also unaffected by acute exposure to SW016789 as

measured by Seahorse assays (**Fig. 4e-g**).

Chronic amplification of secretion leads to transient UPR^{ER} and shutdown of beta cell

function

Acute SW016789-induced insulin hypersecretion eventually caused beta cells to lose

normal GSCa and GSIS responses which we hypothesized was due to the UPR^{ER}. To test this,

we treated MIN6 cells in a time-course with SW016789 or thapsigargin and collected RNA and

protein for analysis (**Fig. 5a**). Acute SW016789 increased immediate early gene (IEG) expression

within 1 h which decreased to near baseline by 2-6 h (**Fig. 5b**), in agreement with observed GSCa

effects. Thapsigargin did not affect expression these IEGs. SW016789 also induced expression of

UPR^{ER} genes by ~1 h with a peak from 2-6 h depending on the specific gene (**Fig. 5c**), followed

by a return to near baseline by 24 h. This was in stark contrast to thapsigargin which caused a

similar fold induction, but delayed peak of UPR^{ER} gene expression which persisted at 24 h.

Notably, the oxidative stress transcription factor *Txnip* was induced only by thapsigargin. Over the

time-course, SW016789 did not significantly alter insulin gene expression, but thapsigargin

caused a decrease after 24 h (**Fig. 5d**). SW016789 decreased insulin protein content at 6 h but

caused no further decrease by 24 h (**Fig. 5e**), suggesting the effect may be due to the induced

hypersecretion and implied that after shutdown of beta cell function the drop in insulin content

halted. We observed a similar pattern of induction and return to baseline of UPR^{ER} genes with

higher doses of SW016789 (**ESM Fig. 4a**), indicating SW016789 did not induce terminal UPR^{ER}

as occurs with thapsigargin. We also tested other endocrine cells that express stimulus-secretion

coupling machinery similar to beta cells, including a human delta cell line and a mouse intestinal L

cell line. SW016789 had minimal effects on IEGs or UPR^{ER} genes in these lines, while

thapsigargin robustly induced the UPR^{ER} (**ESM Fig. 4b-c**).

We also observed differences at the protein level between SW016789 and thapsigargin for

UPR^{ER} and apoptotic components (**Fig. 6a**). Thapsigargin, but not SW016789, significantly

induced the apoptosis markers CHOP and cleaved PARP by 24 h. Phosphorylated PERK was

significantly induced by thapsigargin at both 6 and 24 h, while the effects of SW01789 were

minimal. Alterations in phosphorylated eIF2α were variable and not significantly different with any

treatment at 6 and 24 h; however, thapsigargin induced BiP by 24 h. ATF3 and ATF4 protein

expression was induced only at 6 h by SW016789 and to a lesser extent than with thapsigargin

(**Fig. 6b**). Amounts of beta cell transcription factors Pdx1 and MafA were unaltered by 6 or 24 h of

SW016789 or thapsigargin (**Fig. 6c**). Together, these results partially explain why even though

SW016789 amplified secretion and caused ER stress, beta cells only ceased their secretory

function and did not undergo terminal UPR^{ER}.

Acute effects of SW016789 are mediated via Ca^{2+} influx and PKCs

The UPR^{ER} effects of SW016789 in beta cells appeared to stem from the enhancement of

nutrient-stimulated Ca^{2+} influx and insulin secretion. To elucidate the mechanisms underlying

SW016789-induced hypersecretion of insulin and subsequent UPR^{ER} induction, we took two

chemical approaches. In the first approach, we co-treated beta cells acutely with SW016789 and

candidate compounds to identify any synergy or disruption in SW016789 actions. Among the

stimuli tested, we discovered SW061789 exhibited synergy between and phorbol esters as well as

Ca^{2+} channel openers. PKC activation by the phorbol ester phorbol 12-myristate 13-acetate (PMA)

has well known effects on beta cells [34, 35]. Phorbol esters, including PMA, activate a subset of

PKCs, as well as other targets [36], to potentiate nutrient-stimulated insulin secretion. While

SW016789 and PMA each independently amplified GSIS, the combination of PMA and

SW016789 elicited a marked synergistic insulin secretion response in the absence of nutrients

(**Fig. 7a, DMSO pretreated**). To further explore the role of PMA-activated PKCs in the response

to SW016789, we exploited the property of chronic (>16 h) treatment with PMA which causes the

degradation of the PMA-responsive PKCs [35]. According to this paradigm, we pre-treated beta

cells overnight with PMA and repeated the acute stimulation experiment. Under these conditions,

SW016789 and PMA no longer stimulated secretion in the absence of nutrients and the effect of

SW016789 on GSIS was no longer significant (**Fig. 7a, PMA pretreated**). These results indicated

SW016789 may act in part though PKCs to elicit its acute effects. We also tested the effects of

directly opening VDCCs in the presence or absence of SW016789. The potent VDCC activator

FPL64176 phenocopied SW016789 in chronic (**Fig. 7b**) and acute (**Fig. 7c**) assays in beta cells.

FPL64176 had distinct characteristics, including acutely synergizing with SW016789 in the

absence of nutrients to induce Ca^{2+} influx and insulin secretion (**Fig. 7c,d**) and impacting GSCa

almost immediately compared to the more delayed effect of SW016789 (**Fig. 7d**). These data suggested that FPL64176 and SW016789 act by different mechanisms.

In a second approach we used a chemical suppressor screen to disrupt potentially involved pathways by co-treating cells with SW016789 and with compounds having known mechanisms. Compounds were tested for their ability to protect against chronic inhibitory effects of SW016789 (**Fig. 8a, ESM Table 2**). The VDCC blocker nifedipine was identified as a hit and was selected for further studies. Co-treatment of InsGLuc-MIN6 beta cells with SW016789 and nifedipine significantly blocked the chronic inhibitory effects of SW016789 on GSIS (**Fig. 8b**) and partially mitigated the induction of *Ddit3* (CHOP) expression at 6 h (**Fig. 8c**). We confirmed the acute potentiating effects of SW016789 on GSIS were indeed dependent on VDCC-mediated Ca^{2+} influx, as co-treatment with nifedipine completely blocked all stimulated secretion in the presence or absence of SW016789 (**Fig. 8d**). Furthermore, the protective effects of nifedipine against chronic SW016789 exposure were confirmed in human islet static culture GSIS experiments (**Fig. 8e**).

DISCUSSION

Deconvolving the mechanism of action of SW016789

A few conclusions can be made about the mechanism of SW016789 based on the acute phenotype in beta cells. GSCa and GSIS were enhanced by SW016789, but KCl-induced responses were unaffected, suggesting the involvement of metabolism. Metabolic measurements suggested that SW016789 affects nutrient-induced insulin secretion downstream of ATP generation to enhance Ca^{2+} influx. We discovered intersections of SW016789-mediated actions with the PKC activator PMA and VDCC activator FPL64176. This raised concerns about the requirement for nutrient-stimulated ATP production given that SW016789, PMA, and FPL64176 are not nutrients and individually do not stimulate substantial Ca^{2+} influx or insulin secretion (**ESM Fig. 5**). In beta cells, phorbol esters potentiate GSIS through PKC activation [37, 38], but PKCs are not required for normal GSIS [35, 39]. Synergy between phorbol esters and SW016789 may occur through PKC-mediated phosphorylation of substrates involved in insulin exocytosis that lower the threshold for SW016789 to cause enhanced Ca^{2+} influx [40]. We also observed a small, but clear impact of SW016789 on Ca^{2+} influx and InsGLuc secretion in the presence of diazoxide and low KCl which was glucose-dependent (**Fig. 2c, ESM 2c**). This suggests SW016789 can bypass K_{ATP} to cause membrane depolarization or VDCC opening. SW016789 could potentially

outcompete the effect of diazoxide on K_{ATP}, although we think this is unlikely because of

estimations that >90% of K_{ATP} channels must close before beta cells depolarize [3, 41, 42].

Given the prominent role of cAMP in the potentiation of insulin secretion, we had initially

suspected SW016789 might act through a Gαs-coupled GPCR. However, we did not observe a

major impact of SW016789 in cAMP reporter assays (**ESM Fig. 3a-b**). We also did not observe

protection from chronic SW016789 effects by co-treatment with inhibitors of cAMP pathways (e.g.

PKA inhibitor H89, adenylyl cyclase inhibitor ddAd) (**Fig. 8A**). While previous work has shown that

the cAMP-PKA pathway can protect against thapsigargin-mediated beta cell death [43],

SW016789 did not cause cell death (**Fig. 1g-i**) and the UPR^{ER} dynamics induced by SW016789

appear to be quite different compared to thapsigargin.

Among compounds tested for protection against SW016789, the most consistent hits were

from the dihydropyridine VDCC inhibitor family. We surmise that preventing increased Ca^{2+} influx

abrogates SW016789-enhanced insulin secretion, thereby preventing downstream UPR^{ER} and

preserving beta cell function. As blocking VDCCs prevents both Ca^{2+} influx and subsequent

insulin secretion, it is unclear whether downstream stress and functional loss is induced

specifically because of chronically increased Ca^{2+}, enhanced insulin release, or both. Indeed,

genetically reducing insulin production by 50% mitigated stress in mouse beta cells [44],

suggesting the possibility that in our system, blocking insulin secretion itself using VDCC inhibitors

may be responsible for mitigating hypersecretion-induced stress.

Beta cell adaptation and dysfunction in response to chronic secretory demand

Chronic metabolic stress leads to beta cell dysfunction and two recent studies provide

prime examples [45, 46]. Sustained physiological hyperglycemia (72 h) increases absolute insulin

secretion but impairs beta cell function as gauged by the disposition index [45]. Accordingly,

human islets exposed to glucolipotoxic stress for 48 h were unable to recover GSIS, while islets

exposed to milder stress (high glucose or palmitate alone) were able to recover function [46].

Under our culture conditions SW016789 initially potentiated beta cell function, but the secretory

response shut down by 4 h. Although UPR^{ER} induction was transient, returning to baseline after

24 h, beta cell function in terms of insulin secretion remained impaired. Beta cells recovered from

this inhibited state after a 48 h washout, indicating the changes were reversible. A potential

explanation is that a protein(s) affected by SW016789 signaling are degraded/reduced and require

the washout period to recover. Recently, multiple groups have shown that transient UPR^{ER}, either

downstream of partial pancreatectomy [47] or via inhibition of salt-inducible kinase (SIK) [48], is

associated with enhanced beta cell proliferation. While we did not observe significant alterations in

cell viability or death over a 72 h exposure to SW016789, it is possible the mechanism of UPR^{ER}

induction due to hypersecretion in this case is different from that of pancreatectomy or SIK

inhibition.

SW016789 selectively and transiently induced canonical UPR^{ER} stress response genes,

but with a distinct temporal pattern from that of thapsigargin. A lesser induction of ATF3/4, p-

PERK, and p-eIF2α may indicate an overall weaker induction of the PERK arm of the UPR^{ER} by

SW016789. Our findings also suggest a lack of oxidative stress induction by SW016789

ascertained by no observed changes in glutathione redox state or *Txnip* expression. SW016789-

treated beta cells were therefore able to downregulate their response to transiently enhanced Ca^{2+}

influx. Relative induction of pro-survival versus pro-apoptotic genes may underlie the effects of

SW016789-mediated UPR^{ER}. For example, the Ca^{2+}-activated gene *Npas4* was shown to have a

protective role in beta cells and was highly induced by SW016789, but not by thapsigargin [49,

50]. A gene program that mitigates stress within the first 6 h of drug treatment may allow

SW016789-treated beta cells to downregulate UPR^{ER} pathway before the point of no return.

SW016789 will be a useful tool compound for discovering genes involved in adaptive versus

maladaptive responses to chronic Ca^{2+} influx or secretory pressure.

Role of pharmacological modulation of VDCC activity for beta cell protective effects

Ca^{2+} channel blockers have been in the spotlight for their therapeutic value in both type 1

[51] and type 2 diabetes [52]. For example, verapamil improved beta cell function in a clinical trial

of recent-onset type 1 diabetes [51]. The proposed mechanism of action is that suppressing beta

cell Ca^{2+} influx reduces expression of the cellular redox regulator *Txnip*, leading to protection from

apoptosis [53]. In our studies SW016789 did not induce *Txnip*, suggesting an alternate

mechanism. In addition, the VDCC blockers of the dihydropyridine class (nifedipine, nimodipine,

amlodipine), as well as the phenylalkylamine class (verapamil) protected beta cells from

SW016789-induced dysfunction. Our results showing the protective effects of nifedipine agree

with previous findings in beta cells using other stressors including hyperglycemia and palmitate

[54-56]. Distinct VDCC inhibitor mechanisms of action may underlie the differences between

dihydropyridine and phenylalkylamine-mediated beta cell protection [57] and may imply that

SW016789 acts through a mechanism or pathway which is more dependent on VDCCs in the

inactivated state. Because amplified GSCa was confirmed as a major mechanism underlying the

effects of SW016789, we hypothesized that directly activating VDCCs using FPL64176 could phenocopy SW016789 [58]. While SW016789 activity on Ca^{2+} influx was inhibited by nifedipine, it also synergized with FPL64176 to enhance Ca^{2+} influx and secretion. The kinetics of Ca^{2+} influx induced by FPL64176 or SW016789 in the presence of glucose differed greatly. In agreement with our findings with FPL64176 and SW016789, prior work showed that chronic treatment with VDCC activator BayK8644 caused insulin secretion defects attributed to decreased abundance of K_{ATP} channel and VDCC subunits [59]. Although not assessed in those studies, beta cells likely underwent transient UPR^{ER} concomitant with or prior to losing function.

Nifedipine or newer generation dihydropyridines like amlodipine, may also be useful therapeutics for conditions that cause hyperinsulinemia or where beta cell VDCCs are dysfunctional. A recent example is an individual with congenital hyperinsulinism with a gain-of-function mutation at a conserved residue in the α1 pore-forming subunit of Cav1.3 (L271H), encoded by *CACNA1D* [60]. Hyperinsulinism in this individual was successfully treated with nifedipine and diazoxide. However, chronic blockade of beta cell VDCCs should be carefully considered, as preliminary findings with genetic deletion of Cav1.3 in mice suggest a positive role in beta cell mass [61]. Auxiliary channel subunits can also impact beta cell function in diabetes. For example, the VDCC $β_3$ subunit (*Cacnb3*) is upregulated in islets from diabetic animals and was associated with decreased channel function. Deletion of *Cacnb3* improved beta cell function in a mouse model of diabetes [62, 63]. Future research into precision targeting of VDCCs or their regulatory partners may be a promising avenue for diseases of beta cell dysfunction.

In conclusion, we discovered a new compound and potentially novel pathway that modulates beta cell function and may expand the cohort of targets for disease mitigation. Simultaneously, these discoveries also generate new knowledge about the mechanics of nutrient- and hormone-regulated exocytosis from specialized secretory cell types, including insights into the metabolic amplifying pathway.

FIGURE LEGENDS

Fig. 1. Discovery of SW016789 as a small molecule chronic suppressor of insulin secretion.
(a) High-throughput screening workflow leading to the discovery of SW016789. Screening was performed on an 8,320-compound diversity subset representing the chemical space of the full compound library at the UT Southwestern Medical Center High-Throughput Screening Core. Cells were treated with control and test compounds for 24 h in normal medium followed by a washout

and stimulation with glucose and KCl in the presence of diazoxide and finally subjected to InsGLuc assays. These maximal stimulatory conditions afforded the assay a large dynamic range (average Z-score >0.5) and resulted in 168 primary hits which after structural clustering were narrowed down to 82, of which 32 confirmed in triplicate. **(b)** Concentration response curve testing to determine EC_{50} of SW016789 InsGLuc-MIN6 after a 24 h exposure. Data are the mean ± SD of three independent assays. **(c,d)** In mouse InsGLuc-MIN6 beta cells (**c**) and human islets (**d**), 24 h exposure to SW016789 (5 µM) resulted in suppression of GSIS during assays in the absence of compound. Data are the mean ± SD of 3-4 independent experiments. **(g-i)** Exposure of MIN6 beta cells to DMSO (0.1%) or SW016789 (5 µM) for up to 72 h did not alter relative amounts of (**g**) live cells, (**h**) dead cells, or (**i**) the live/dead cell ratio. Digitonin (Dgt) treatment was a positive control for cell death added just prior to the assay. **(j)** InsGLuc-MIN6 cells were exposed to SW016789 (5 µM) for 24-72 h followed by a 1 h washout in glucose-free KRBH. Cells were then stimulated for 1 h with the indicated treatments (0G, glucose-free; 20G, glucose 20 mM; Fsk, forskolin 10 µM; IBMX 100 µM; PMA, phorbol myristate acetate 100 nM). *, P<0.05 vs respective Basal; †, P<0.05 vs respective DMSO. **(k)** InsGLuc-MIN6 cells were exposed to SW016789 (5 µM) for 24 h followed by a 48 h washout in complete medium. Cells were then assayed for glucose-stimulated InsGLuc secretion. All data are the mean ± SD of at least three independent experiments. *, P<0.05 by two-way ANOVA.

Figure 2. Time-course studies and phenotypic assays reveal SW016789 as an acute potentiator of nutrient-stimulated insulin secretion. (a) InsGLuc-MIN6 cells were treated with SW016789 (5 µM) in a time-course as indicated in the diagram. At the end of the time-course, glucose-stimulated InsGLuc secretion was assayed. Data are the mean ± SD of N=4. **(b)** InsGLuc-MIN6 cells were exposed to SW016789 (5 µM) for 1 h during stimulation with glucose (20 mM), leucine (5 mM), or leucine/glutamine (Leu/Gln; 5mM each) or **(c)** in the presence of diazoxide (250 µM) with or without KCl (35 mM) or glucose (20 mM). Data are the mean ± SD of N=3. *, P<0.05 by two-way ANOVA.

Figure 3. SW016789 treatment modulates nutrient-stimulated Ca^{2+} influx. (a) MIN6 beta cells pre-treated 24 h with SW016789 (5 µM) or DMSO (0.1%) followed by washout prior to glucose-stimulated Ca^{2+} influx assays and **(b)** area-under-the-curve (AUC) calculation. *, P<0.05 by unpaired Student's t-test. **(c-f)** MIN6 beta cells acutely treated with SW016789 (5 µM) or DMSO (0.1%) followed by **(c)** glucose-, **(d)** leucine/glutamine-, or **(e)** KCl-stimulated Ca^{2+} influx assays

and **(f)** associated AUCs. Data are the mean ± SD of three independent experiments. *, P<0.05 by

two-way ANOVA.

Figure 4. SW016789 does not impact oxygen consumption rate or canonical glycolysis and

TCA cycle metabolites in MIN6 beta cells. (a) Experimental design for targeted metabolomics in

MIN6 cells preincubated in glucose-free KRBH for 2 h and then treated with or without glucose (0

vs 20 mM) in the presence of DMSO (0.1%) (DMSO_0G and DMSO_20G) or SW016789 (5 µM)

(SW_0G and SW_20G). **(b)** KRBH supernatants were collected for insulin ELISA to verify that

SW016789 potentiated insulin secretion under these conditions. **(c)** Metabolomic data are

represented as the $\log_2$ fold-change with respect to DMSO_0G of three independent experiments.

(d) Representative metabolites showing glucose induced changes in glycolysis (glucose 6-

phosphate, fructose-1,6-bisphosphate), TCA cycle (citrate, α-ketoglutarate, and malate), amino

acids (cysteine, lysine), adenosine monophosphate, and redox potential (reduced glutathione

(GSH) / oxidized glutathione (GSSG)) in MIN6 cells. **(e-g)** MIN6 beta cells were subjected to

Seahorse analysis. Cells were preincubated in glucose-free KRBH and **(e)** oxygen consumption

rate (OCR), **(f)** extracellular acidification rate (ECAR), and **(g)** calculated Seahorse parameters

were measured during stimulation with glucose (20 mM) in the presence or absence of SW016789

(5 µM) or DMSO (0.1%). Subsequently all cells were sequentially stimulated with oligomycin,

FCCP, and Antimycin A. Data represent the mean ± SD of three independent experiments.

Figure 5. SW016789 transiently induces the unfolded protein response (UPR^ER^). (a) MIN6

beta cells were treated with DMSO (0.1%), SW016789 (5 µM), or thapsigargin (Tg, 100 nM) in

complete medium for 0-24 has indicated. **(b-d)** Compound additions were staggered to allow

simultaneous sample harvesting. Expression of **(b)** immediate early genes and **(c)** adaptive and

maladaptive UPR^ER^ genes are shown. **(d)** Expression of *Ins1/2* in the time course and **(e)** insulin

content. All data are the mean ± SD of three independent experiments. *, P<0.05 vs DMSO.

Figure 6. SW016789 and thapsigargin have distinct effects on UPR^ER^-related proteins. (a)

MIN6 beta cells were treated with SW016789 (5 µM) or thapsigargin (Tg, 500 nM) for either 6 or

24 h in complete medium and lysates were immunoblotted. Thapsigargin, but not SW016789,

induced pro-apoptotic markers CHOP and cleaved-PARP (cl-PARP). Alterations in UPR^ER^

markers pS51-eIF2α, pT980-PERK, and BiP are shown. **(b)** SW016789 and Tg increased the

stress-induced transcription factors ATF4 and ATF3. Data are the mean ± SD of 3 independent

experiments. **(c)** Beta cell transcription factors Pdx1 and MafA were not significantly affected by

either drug. Data are the mean ± SD of 2-3 independent experiments. In all immunoblots either

actin or GAPDH were used as loading controls. *, P<0.05 by two-way ANOVA.

Figure 7. SW016789 acutely synergizes with activators of PKC and VDCCs to induce

secretion. (a) InsGLuc-MIN6 cells were treated 24 h with either DMSO (0.1%) or PMA (100 nM)

in complete medium. Cells were then washed and preincubated in glucose-free KBRH for 1 h prior

to stimulation with SW016789 (5 µM), PMA (100 nM), or both in the presence or absence of

glucose (20 mM) for 1 h. Afterward, buffer was collected for InsGLuc assays. Data are the mean ±

SD of eight independent experiments. *,P<0.05 by two-way ANOVA. **(b)** InsGLuc-MIN6 cells were

treated for 24 h with DMSO or the VDCC activator FPL64176 followed by glucose-stimulated

InsGLuc secretion assay in the absence of compounds. Data are the mean ± SD of four

independent experiments. *,P<0.05 Basal vs. Glucose. **(c)** InsGLuc-MIN6 cells were acutely

treated for 1h with DMSO, FPL64176, or FPL64176 + SW016789 in the presence or absence of

glucose. Data are the mean ± SD of four independent experiments. *,P<0.05 vs DMSO. **(d)**

Normal GSCa can be observed with glucose and DMSO (peach) and is enhanced by SW016789

(red). FPL64176 rapidly potentiates glucose-stimulated Ca^{2+} influx in MIN6 cells (green). In the

absence of glucose, DMSO (black), FPL64176 (grey) and SW016789 (blue) have little effect

individually, but together FPL64176 and SW016789 synergize to stimulate Ca^{2+} influx (pink). Data

are the mean ± SD of three independent experiments.

Figure 8. Chemical suppressor screen uncovers VDCC inhibitors as protective agents in

chronic SW016789 treatment in MIN6 beta cells and human islets. (a) InsGLuc-MIN6 cells

were co-incubated with SW016789 (5 µM), and candidate small molecules as indicated. Following

24 h incubation, all treatments were removed and glucose-stimulated InsGLuc secretion

responses were assessed. **(b)** InsGLuc-MIN6 cells pretreated in complete medium for 24 h with

DMSO (0.1%) or SW016789 (5 µM) in the presence or absence of nifedipine (10 µM). After

compound washout cells were stimulated with or without glucose (20 mM) for 1 h for InsGLuc

assays. Data are the mean ± SD of five independent experiments. **(c)** Cells were treated as in **(b)**

and *Ddit3* gene expression was measured. Data are the mean ± SD of four independent

experiments. **(d)** InsGLuc-MIN6 cells were acutely incubated with DMSO (0.1%), nifedipine

(10µM), SW016789 (5µM), or nifedipine + SW016789 for 1h in the presence or absence of

glucose (20mM). Data are the mean ± SD of four independent experiments. **(e)** Human islets were

treated 24 h in complete medium with DMSO (0.1%) and SW016789 (5 µM) in the presence or

absence of nifedipine (10 µM). Islets were washed and incubated in low glucose (1 mM) KRBH for

1 h, buffer discarded, then incubated 1 h in low (1 mM) or high (16 mM) glucose KRBH for 1 h.

Data represent the mean ± SD of insulin measured in supernatant normalized to total insulin

content from six different donor islet preparations. *, $P<0.05$ by two-way ANOVA.

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 Electronic Supplementary Material (ESM): Rodrigues-dos-Santos K, Roy G, Binns DD, et al.

ESM Methods

Ca^{2+} measurements in the diazoxide paradigm or for store-operated Ca^{2+} entry (SOCE) – For Ca^{2+}

measurements in the presence of diazoxide, after loading with Ca^{2+} indicator dye, cells were incubated

in KRBH containing 250 µM diazoxide for 5 min prior to the baseline read and subsequent stimulation

with 35 mM KCl and/or 20 mM glucose with DMSO or SW016789 in the continued presence of

diazoxide. For measurements of ER Ca^{2+} and SOCE, beta cells were incubated in normal glucose-free

KRBH for 1 h, then loaded with Fura-2-LR-AM (5 µM) in Ca^{2+}-free KRBH (5 mM KCl, 120 mM NaCl, 15

mM HEPES, pH 7.4, 24 mM NaHCO$_3$, 3 mM MgCl$_2$, and 1 mg/ml radioimmunoassay-grade BSA) for

25 min and a 5 min washout in the same buffer. Cells were placed in the BioTek Synergy H1 for a

baseline read (30 s), followed by injection of thapsigargin (10 µM) for a 5 min read, and CaCl2 (2.5 mM)

for another 5 min read.

cAMP reporter assays - For relative cAMP measurements, the genetically-encoded Epac-based

bioluminescence-resonance energy transfer (BRET) reporter for cAMP (CAMYEL) was used as

previously described [1]. CAMYEL MIN6 cells were preincubated in glucose-free KRBH for 1.5 h. Cells

were incubated for 15 min at room temperature with coelenterazine-h (20 µM). After a 3 min baseline

recording, stimulations were added, and plate read for an additional 15 min. Using the BRET1 cube

from BioTek, emission signals at 460/40 and 540/25 nm (center/bandpass) were measured every 0.8

s. Data were normalized by subtracting the mean of the respective baseline reads. Area under the

curves (AUCs) were calculated in GraphPad Prism using a baseline of 0 ΔRFU and ignoring peaks that

are <10% of the distance from minimum to maximum ΔRFU and those defined by fewer than 15

adjacent points. All peaks must go above the baseline.

Chiral separation and structure-activity analysis - Separated enantiomers of racemic SW016789

were obtained from Lotus Separations using supercritical fluid chromatography [2]. Purified

enantiomers were resuspended in DMSO and subjected to acute and chronic InsGLuc-MIN6

experiments as described. For structure-activity analysis, structures of SW016789 analogs and their

respective activity scores were analyzed in Datawarrior software [3]. Glucose-stimulated InsGLuc

secretory activity normalized to unstimulated secretion was input along with structures and activity-cliff

analysis was performed.

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ESM Results

ESM Figure 1. Acute dose-response testing of SW016789 in InsGLuc-MIN6 cells. Cells were treated with varying concentrations of SW016789 or vehicle (0.1% DMSO) in the **(a)** presence and **(b)** absence of glucose (20 mM) for 1 h. Data are the mean ± SD of three independent experiments. The EC$_{50}$ of SW016789 calculated in the presence of glucose was 2.7E-6 M. **(c)** Chiral separation of racemic mixture of SW016789 into two distinct peaks. **(d)** Enantiomeric structures of SW016789. **(e,f)** Secreted Gaussia activity from InsGLuc-MIN6 cells treated either **(e)** only during glucose stimulation (1 h) or **(f)** chronically (24 h) prior to glucose stimulation. Cells were exposed to DMSO (0.1%), or purified enantiomers of SW016789 (peak 1, peak 2, 5 µM each), or the SW016789 racemate (5 µM). Data are the mean ± SD of three independent experiments. *, P<0.05 by two-way ANOVA. **(g)** Structure-activity relationship of structural analogs assayed in chronic (24 h) treatment of InsGLuc-MIN6 cells. Fold InsGLuc activity is normalized to secretion in unstimulated conditions. Increased fold activity indicates a loss in chronic inhibitory activity, as seen for the structure with disrupted chiral center. DataWarrior was used to generate a network display organized by structural similarity and colored by activity.

ESM Figure 2. Effects of SW016789 on Ca²⁺ influx under the diazoxide paradigm and during SOCE and ROCE. (a,b) InsGLuc-MIN6 cells were exposed to DMSO (0.1%) or SW016789 (5 μM) for **(a)** 24 h before Ca²⁺ influx assay or **(b)** were acutely co-stimulated with DMSO or SW016789, as indicated above each graph. Cells were incubated in the presence of diazoxide (Dz, 250 μM) and stimulated with either Dz + KCl 35 mM or Dz + KCl 35 mM + glucose 20 mM. Expectedly, the addition of glucose did not alter the amount of Ca²⁺ influx in the presence of diazoxide and KCl in either chronic or acute treatments. Associated AUC calculations are shown. Data are the mean ± SD of three independent experiments. *,P<0.05 by one-way ANOVA. **(c)** MIN6 cells were incubated in the presence or absence of diazoxide (250 μM) in the KRBH during Ca²⁺-influx assays. Cells were then stimulated with glucose (20 mM), SW016789 (5 μM), or both at the time indicated by the arrow. Data are the mean ± SD of three independent experiments. **(d)** Endoplasmic reticulum (ER) Ca²⁺ stores and store-operated Ca²⁺ influx (SOCE) were assayed in MIN6 beta cells. Thapsigargin (Tg, 10 μM) elicited ER Ca²⁺ leakage into the cytosol and adding back CaCl₂ (2 mM) resulted in SOCE. AUCs were calculated separately for each peak. **(e)** MIN6 cells were stimulated with carbachol (CCh, 250 μM) to assess receptor-operated Ca²⁺ entry (ROCE) after a 10 min pretreatment with SW016789 or DMSO. Data are the mean ± SD of three independent experiments.

ESM Figure 3. GPCR screening of SW016789 in the PRESTO-TANGO assay. (a) MIN6 cells stably expressing the cAMP BRET sensor CAMYEL were preincubated in glucose-free KRBH for 1.5 h prior to treating with coelenterazine-400A for 15 min. Baseline BRET was read for 3 min prior to stimulation as indicated. Cells were stimulated with forskolin (Fsk, 10μM) and IBMX (1μM) as a positive control, SW016789 (10 μM) alone, glucose (20 mM) alone, SW016789 and glucose together, or DMSO (0.1%). **(b)** ΔBRET peak area defined using baseline of 0 and ignoring peaks under 0.5 units high and fewer than 10 adjacent points. Data are the mean ± SD of 3 independent experiments as indicated by individual data points on the AUC bar graph. *, P<0.05 by two-way ANOVA. **(c)** Results of PRESTO-TANGO assay using 10 μM SW016789 showed only one prominent hit, CXCR7. **(d)** Validation studies performed at the PDSP core show the EC50 of SW016789 on CXCR7 is ~26 μM.

ESM Figure 4. SW016789 did not impact UPR^ER in other neuroendocrine cells nor cause maladaptive UPRER at high concentrations. (a) Relative UPR^ER gene expression in MIN6 cells treated for either 6 or 24 h with vehicle (0.1% DMSO) or increasing concentrations of SW016789 (1-20 μM). Thapsigargin (100 nM) was included as a positive control at each time point. Data are the mean ± SD of four independent experiments. *, P<0.05 by two-way ANOVA. **(b,c)** Relative gene expression in a mouse intestinal L-cell cell line (GLUTag) **(b)** and a human islet delta cell line (QGP1) **(c)** treated with DMSO (0.1%), SW016789 (5 μM), or thapsigargin (Tg, 100 nM) in complete medium for 6 or 24 h. Glucagon (*Gcg*) message was measured for L-cells as they produce GLP-1 encoded by *Gcg*. Somatostatin (*SST*) was measured as the major product of δ cells. All data are the mean ± SD of at least 3 independent experiments. *,P<0.05 by two-way ANOVA.

Table S1. GPCRome screen results with SW016789. Raw fold change data provided by the PDSP core for >300 GPCRs assayed using the Presto-Tango system.

DNA	ID#	Replicates				AVG	CV
		I	II	III	IV		
ACKR3	282	59.7	56.7	49.2	62.9	57.1	0.09
BB3	281	6.7	4.6	4.7	3.6	4.9	0.23
P2RY6	239	4.7	5.2	4.8	4.3	4.7	0.06
S1PR4	296	3.5	2.8	3.8	6.1	4.0	0.31
GPR34	188	3.2	3.5	3.6	5.7	4.0	0.25
FFA1	314	3.7	3.4	3.8	4.0	3.7	0.06
CHRM3	242	5.2	2.6	3.5	2.9	3.6	0.28
GPR52	316	3.2	3.2	3.4	4.1	3.5	0.11
OPRK1	207	2.9	3.4	3.9	3.6	3.5	0.10
NPY5R	199	3.4	3.2	3.4	3.5	3.4	0.04
GPR141	315	3.2	3.3	3.1	3.4	3.2	0.04
MRGPRE	230	3.3	3.2	3.1	3.0	3.2	0.04
ADRA2A	161	3.8	3.4	2.7	2.7	3.1	0.14
P2RY14	319	2.8	2.8	3.1	3.8	3.1	0.14
SSTR4	152	2.2	3.5	2.6	4.0	3.1	0.23
GAL1	226	3.2	3.3	3.0	2.5	3.0	0.10
GPR88	181	3.3	3.8	2.3	2.5	3.0	0.21
CCKBR	297	3.6	3.4	2.2	2.3	2.9	0.21
MTNR1A	167	2.1	3.0	2.8	3.6	2.9	0.18
MRGPRX1	142	3.4	2.7	2.9	2.4	2.8	0.13
OPRM1	127	2.5	3.0	3.3	2.4	2.8	0.13
VIPR1	240	3.2	1.8	1.8	4.3	2.8	0.37
ADRB1	169	3.7	2.7	2.5	2.2	2.8	0.20
HRH1	317	3.1	2.7	2.6	2.5	2.7	0.07
TACR3	320	1.9	2.8	2.4	3.8	2.7	0.25
MRGPRF	263	2.1	3.3	2.7	2.5	2.7	0.16
ADRA2B	113	3.4	2.8	1.8	2.1	2.5	0.25
ADORA1	241	2.9	2.2	2.7	2.1	2.5	
GPR55	245	2.7	2.4	2.0	2.7	2.4	0.12
CHRM1	98	3.2	1.8	2.8	1.8	2.4	0.25
P2RY1	223	2.2	2.9	2.1	2.3	2.4	0.12
CXCR2	258	2.3	2.4	2.6	2.1	2.4	0.06
CRHR1	114	2.8	2.2	2.2	2.3	2.4	0.11
GPR44	212	2.2	1.7	1.8	3.4	2.3	0.30
LTB4R	198	2.8	2.2	1.9	2.1	2.3	0.15
PTGER3	176	1.5	1.8	2.3	3.3	2.3	0.30
CHRM2	313	2.4	2.2	2.2	2.1	2.2	0.06
HTR2CVGV	102	2.6	2.4	1.8	1.7	2.1	0.18

FPR3	243	1.9	2.4	2.2	2.0	2.1	0.09
GPR6	261	3.5	2.0	1.2	1.8	2.1	0.41
SCTR	144	1.8	2.4	1.9	2.3	2.1	0.12
GHSR	251	2.3	1.9	2.4	1.7	2.1	0.14
GPR156	252	1.6	1.6	1.8	3.0	2.0	0.30
CCR3	305	2.8	1.8	1.8	1.7	2.0	0.22
CXCR3	162	2.1	2.0	2.5	1.3	2.0	0.21
GPR87	293	2.2	2.0	1.7	2.1	2.0	0.09
OPRD1	119	2.0	2.2	2.1	1.6	2.0	0.12
GPR150	116	2.5	1.5	2.1	1.7	1.9	0.19
GPR3	292	1.4	1.9	1.9	2.5	1.9	
CXCR5	274	1.9	2.0	1.7	2.0	1.9	0.06
PTAFR	272	1.8	1.8	1.8	2.2	1.9	
FPR1	50	2.0	1.8	2.0	1.7	1.9	0.07
TACR2	224	1.6	1.6	2.3	2.0	1.9	0.15
CD97	209	2.8	2.0	1.5	1.1	1.8	0.35
MAS1	247	1.7	2.2	1.7	1.7	1.8	0.12
HRH4	166	2.0	1.7	1.9	1.7	1.8	0.09
CYSLTR2	170	1.9	2.1	1.6	1.8	1.8	0.10
SSTR1	200	2.0	1.4	1.4	2.5	1.8	0.25
HTR1B	246	2.3	1.5	1.8	1.7	1.8	0.16
GPR84	165	2.5	1.8	1.5	1.3	1.8	0.25
MRGPRX4	150	1.6	2.5	1.7	1.3	1.8	0.25
ELTD1	290	1.8	1.7	1.7	1.8	1.8	0.01
AGTR2	257	2.1	1.8	1.6	1.5	1.7	0.13
GPR17	268	1.5	1.6	1.7	2.2	1.7	0.15
HTR1D	254	1.4	2.0	1.6	2.0	1.7	0.15
AVPR2	273	2.0	1.8	1.6	1.5	1.7	0.11
HRH3	61	1.7	1.2	3.0	1.0	1.7	0.44
TAAR5	48	1.3	2.1	1.2	2.3	1.7	0.26
TACR1	312	1.4	1.3	1.6	2.5	1.7	0.26
MTNR1B	175	1.8	1.6	1.6	1.7	1.7	0.06
CHRM4	217	2.0	0.9	1.4	2.3	1.7	0.33
MC5R	222	1.5	1.5	1.7	1.7	1.6	0.07
APJ	265	2.1	1.5	1.5	1.5	1.6	0.16
OPN5	295	1.5	2.0	1.4	1.5	1.6	0.15
GPR82	285	1.9	1.7	1.4	1.6	1.6	0.11
GPR12	299	1.5	1.5	1.8	1.4	1.6	0.10
HTR2C INI	157	1.8	1.3	1.6	1.6	1.6	0.12
NTSR1	287	1.5	1.5	1.5	1.6	1.5	0.02
MC4R	214	2.1	1.3	1.7	1.0	1.5	0.28
DRD2	154	0.9	1.1	3.5	0.7	1.5	0.74
S1PR1	192	1.1	1.5	1.4	2.1	1.5	0.24
GPR182	276	1.3	1.2	1.6	1.9	1.5	0.18

HCA2	309	1.5	1.6	1.3	1.5	1.5	0.06
MC1R	126	2.2	1.7	1.3	0.7	1.5	
HTR1F	270	1.3	1.4	1.3	1.9	1.5	0.16
PRRP	55	1.3	1.4	1.4	1.7	1.5	0.11
UTS2R	72	1.3	0.9	1.0	2.4	1.4	0.41
SSTR2	16	1.6	1.6	1.1	1.3	1.4	0.13
GPR32	52	1.1	1.0	1.2	2.4	1.4	0.41
QRFP	79	0.6	1.1	1.8	2.1	1.4	0.44
MC3Rb	22	1.1	1.3	1.4	1.7	1.4	0.15
HTR1E	262	1.1	1.5	1.3	1.7	1.4	0.16
GPR101	275	1.4	1.6	1.4	1.2	1.4	0.09
LPAR5	118	1.5	1.0	1.2	1.7	1.4	0.19
S1PR2	120	1.1	1.7	1.1	1.6	1.4	0.19
AGTR1	41	1.0	2.6	0.7	1.1	1.4	0.54
GPR146	51	3.3	0.7	0.8	0.6	1.4	0.83
MRGPRX2	271	1.2	1.4	1.4	1.4	1.3	0.07
0	256	1.4	2.1	0.8	1.1	1.3	0.38
GMR2	171	1.2	1.4	1.4	1.3	1.3	0.05
CRHR2	122	1.2	1.1	1.8	1.2	1.3	0.20
GPR85	173	1.7	1.5	1.0	1.1	1.3	0.22
NPBW2	279	1.4	1.5	1.4	1.0	1.3	0.12
HTR4	182	1.0	2.3	0.8	1.2	1.3	0.44
GPR18	227	1.3	1.1	1.3	1.5	1.3	0.10
GRM8	237	1.5	1.2	1.4	1.2	1.3	0.11
GAL3	115	1.3	1.5	1.1	1.4	1.3	0.10
CXCR4	266	1.6	1.5	1.0	1.0	1.3	0.22
GPR31	180	1.1	0.9	1.6	1.5	1.3	0.22
GPR27	44	1.3	1.2	1.1	1.5	1.3	0.13
CCR10	193	1.0	1.4	1.6	1.0	1.3	0.19
AVPR1A	49	1.9	1.3	0.9	0.8	1.2	0.35
GPR26	172	1.3	1.6	1.1	1.0	1.2	0.17
ADRB3	33	2.1	0.8	1.2	0.8	1.2	0.43
GPR173	156	1.0	1.1	1.3	1.5	1.2	0.16
GPR148	59	0.8	1.4	1.0	1.7	1.2	0.27
GPR45	60	0.7	1.2	1.0	1.9	1.2	0.34
S1PR5	136	1.5	0.8	1.3	1.2	1.2	0.23
GPRC5B	197	1.1	0.8	1.0	1.8	1.2	0.33
0	248	1.8	1.0	0.9	1.1	1.2	
VIPR2	80	1.1	1.4	1.0	1.3	1.2	0.14
HCTR2	53	0.8	1.7	1.1	1.2	1.2	0.29
GPR116	195	1.3	1.1	1.2	1.2	1.2	0.08
PTGDR	151	1.6	1.1	1.3	0.7	1.2	
GNRHR	66	1.1	1.1	1.5	1.0	1.2	0.17
GPR97	189	1.9	1.0	0.9	1.0	1.2	0.35

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SSTR5	32	0.9	1.4	1.0	1.4	1.2	0.21
LPAR1	310	1.1	0.9	0.9	1.6	1.1	0.25
OXTR	23	1.8	1.0	0.9	0.8	1.1	0.32
GPR1	267	0.9	1.2	1.3	1.1	1.1	0.13
GPR56	253	1.4	0.9	1.0	1.2	1.1	0.15
HCA1	125	1.3	1.1	1.1	1.0	1.1	0.11
MRGPRD	255	1.0	1.2	1.1	1.1	1.1	0.07
HRH2	141	1.2	0.5	1.4	1.3	1.1	0.31
LHCGR	77	0.6	0.8	2.2	0.7	1.1	0.62
HTR2C VSV	94	1.0	1.2	1.2	1.0	1.1	0.09
GIPR	131	0.6	0.7	1.2	1.8	1.1	0.45
ADRA1A	89	1.3	1.0	1.0	0.8	1.1	0.17
GPR151	67	1.0	1.2	0.9	1.1	1.0	0.08
RXFP4	8	0.9	0.9	1.1	1.3	1.0	0.15
GPR110	283	1.0	1.1	1.0	1.0	1.0	0.04
GPBA	179	1.0	1.0	1.1	1.0	1.0	0.02
CCR2	2	1.0	0.7	1.0	1.4	1.0	0.23
CXCR1	138	1.2	0.5	1.5	0.9	1.0	0.35
OXGR1	303	0.7	1.1	1.1	1.1	1.0	0.16
HTR2B	278	1.1	1.0	1.0	0.9	1.0	0.07
GPR78	21	0.6	1.2	1.1	1.0	1.0	0.25
GPR22	28	0.8	1.0	1.0	1.1	1.0	0.11
GPR19	284	1.1	0.8	0.9	1.1	1.0	0.14
P2RY10	135	1.0	0.9	1.1	0.8	1.0	0.10
GPR77	277	0.8	1.2	0.7	1.2	1.0	0.22
GPR133	27	1.2	0.8	0.8	1.1	1.0	0.19
CCRL2	90	1.3	0.4	0.5	1.6	1.0	0.52
GPR114	147	0.9	1.0	1.0	0.9	1.0	0.03
EDNRB	42	1.1	0.9	1.0	0.9	1.0	0.09
PTGFR	96	0.8	1.3	0.6	1.1	1.0	0.27
HTR5	286	1.0	1.0	0.7	1.1	1.0	0.13
GPR171	4	0.9	0.8	0.9	1.2	1.0	0.15
GPR120	155	1.0	1.2	0.9	0.7	1.0	0.19
GPR135	35	1.0	1.4	0.6	0.7	0.9	0.33
GPR35	196	0.9	0.8	1.0	1.1	0.9	0.10
ADCYAP1R1	1	0.6	1.5	1.1	0.6	0.9	0.40
BDKBR2	177	1.4	0.8	0.7	0.8	0.9	0.28
MCHR1R	30	1.4	0.9	0.7	0.8	0.9	0.28
GPR176	12	0.9	0.9	1.1	0.8	0.9	0.11
F2RL2	306	1.0	1.0	0.8	0.9	0.9	0.06
GPR4	308	0.8	1.2	0.9	0.8	0.9	0.19
MLNR	38	1.1	0.8	1.0	0.8	0.9	0.16
ADORA2A	81	0.4	1.1	1.0	1.2	0.9	0.32
FPR2	99	1.2	0.9	0.7	0.8	0.9	0.22

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FFA2	202	0.7	1.0	1.0	1.0	0.9	0.15
GPR20	20	0.8	0.8	1.3	0.8	0.9	0.23
DRD4	83	0.9	0.7	1.0	1.1	0.9	0.15
GPR21	164	0.8	0.8	1.0	1.1	0.9	0.15
DRD3	34	1.7	0.6	0.7	0.5	0.9	0.52
CXCR6	18	1.1	1.0	0.7	0.8	0.9	0.19
HTR7	294	1.0	1.0	0.7	0.9	0.9	0.12
CALCRb	65	0.9	0.9	1.0	0.8	0.9	0.07
GPR162	148	0.7	0.9	0.9	1.0	0.9	0.10
PTGER1	159	0.8	0.7	0.8	1.2	0.9	0.21
NPFF1	62	1.0	1.1	0.6	0.9	0.9	0.21
GPR126	19	0.8	1.0	0.9	0.8	0.9	0.07
OPRL1	15	0.7	0.8	1.0	1.0	0.9	0.14
CHRM5	250	0.9	0.9	0.8	0.9	0.9	0.06
NMBR	54	0.6	1.0	1.0	0.9	0.9	0.18
MCHR2R	134	1.1	1.1	0.7	0.5	0.9	0.28
P2RY13	311	0.6	0.6	0.9	1.4	0.9	0.37
CCR6	153	1.1	0.8	0.9	0.7	0.9	0.19
GPR113	187	1.0	0.8	0.7	0.9	0.9	0.13
CNR1	225	0.9	0.9	0.8	0.8	0.8	0.05
GPR61	220	0.7	0.9	1.0	0.7	0.8	0.13
GPR132	84	0.8	0.8	0.8	0.9	0.8	0.06
PK2	47	0.7	0.6	0.9	1.3	0.8	0.32
GPR183	235	0.7	0.9	0.8	1.0	0.8	0.16
GPR119	3	1.1	1.0	0.7	0.5	0.8	0.30
LPAR2	6	1.2	0.8	0.7	0.5	0.8	0.32
DRD1	146	0.8	0.9	0.7	0.8	0.8	0.06
NPY4R	78	0.9	0.7	0.9	0.8	0.8	0.12
F2R	298	0.8	0.8	0.9	0.8	0.8	0.05
GPR25	36	0.6	1.0	0.6	1.0	0.8	0.23
PTGIR	63	0.7	0.8	1.1	0.6	0.8	0.21
C5A	185	1.0	0.7	0.8	0.7	0.8	0.16
DRD5	91	0.7	0.7	1.0	0.8	0.8	0.18
GPR111	74	0.5	1.4	0.5	0.8	0.8	0.45
CYSLTR1	26	0.9	0.5	1.1	0.7	0.8	0.29
KISSPEPTIN	69	1.3	0.6	0.7	0.5	0.8	0.41
RXFP2	288	0.7	0.7	0.6	1.2	0.8	0.31
GPR65	269	0.7	0.9	0.7	0.8	0.8	0.07
CASR	137	0.9	0.7	0.5	1.0	0.8	0.26
NTSR2	111	0.7	1.2	0.8	0.4	0.8	0.35
HCTR1	45	0.8	0.9	0.5	0.9	0.8	0.20
CCR8	10	0.9	0.7	0.8	0.7	0.8	0.09
GRM5	221	0.7	0.6	0.7	1.1	0.8	0.26
GPRC5A	29	0.9	0.7	0.7	0.8	0.8	0.09

MAS1L	206	0.8	0.5	0.7	1.1	0.8	0.28
GPR15	108	0.7	0.8	0.7	0.8	0.8	0.09
EDNRA	178	0.8	0.7	0.8	0.8	0.8	0.08
NMUR1	158	0.9	0.7	0.7	0.8	0.8	0.11
SUCNR1	40	0.9	0.7	0.8	0.6	0.8	0.14
HTR6	110	0.7	0.5	0.8	1.1	0.8	0.29
MC2R	14	0.6	1.2	0.5	0.7	0.8	0.33
GPR149	100	0.6	0.8	0.9	0.7	0.8	0.11
CCKAR	289	0.9	0.8	0.7	0.7	0.7	0.13
LPAR6	190	0.9	0.6	0.7	0.8	0.7	0.12
GPR144	43	0.8	0.7	1.0	0.5	0.7	0.27
RXFP3	112	0.7	1.0	0.5	0.7	0.7	0.24
GPRC5D	205	1.1	0.7	0.6	0.6	0.7	0.30
TSHR	232	0.8	0.9	0.8	0.5	0.7	0.24
PTH1R	71	0.8	0.8	0.8	0.6	0.7	0.13
GPR115	291	0.7	0.7	0.7	0.8	0.7	0.06
NMUR2	87	0.7	0.7	0.7	0.8	0.7	0.06
PTH2R	184	1.1	0.7	0.6	0.5	0.7	0.35
TAAR6	304	0.6	0.6	0.7	0.9	0.7	0.16
ADRA1D	105	0.7	0.7	0.7	0.7	0.7	0.04
GPR123	307	0.9	0.4	0.8	0.8	0.7	0.27
GPR63	228	0.7	0.7	0.8	0.7	0.7	0.05
NPBW1	95	0.7	0.9	0.7	0.4	0.7	0.26
GPR160	75	0.7	0.7	0.7	0.8	0.7	0.09
GHRHR	234	0.5	0.8	0.4	1.0	0.7	0.34
LPA4	302	0.8	0.5	0.8	0.8	0.7	0.17
GPR174	219	1.1	0.5	0.5	0.6	0.7	0.38
GPR62	76	1.2	0.6	0.4	0.6	0.7	0.42
ADRA2C	17	0.5	0.5	0.9	0.8	0.7	0.29
BDKBR1	121	0.8	0.9	0.5	0.6	0.7	0.23
GABBR1	107	0.9	0.7	0.7	0.4	0.7	0.26
SSTR3	24	0.9	0.8	0.5	0.6	0.7	0.25
AVPR1B	57	0.9	0.7	0.6	0.6	0.7	0.19
GRM1	213	1.5	0.5	0.3	0.4	0.7	0.69
P2RY2	231	1.0	0.2	0.8	0.7	0.7	0.47
HTR2C VNV	86	0.9	0.7	0.5	0.6	0.7	0.28
GPR157	132	0.7	0.5	0.7	0.8	0.7	
OPN3	7	0.7	0.5	0.5	0.8	0.7	0.20
GPR153	244	0.5	0.6	0.7	0.7	0.7	0.12
GPR161	260	0.6	0.6	0.7	0.7	0.7	0.09
GPRC5C	37	0.8	0.7	0.5	0.6	0.7	0.15
GPR125	203	0.6	0.7	0.6	0.7	0.6	0.05
TA1	208	0.6	0.6	0.7	0.7	0.6	0.07
PTGER2	88	0.6	0.6	0.6	0.8	0.6	0.14

LTB4R2B	318	0.7	0.7	0.4	0.7	0.6	0.18
TBXA2R	64	0.5	0.8	0.5	0.7	0.6	0.22
GPER	139	0.6	0.6	0.6	0.7	0.6	0.11
GPRC6A	101	0.7	0.6	0.6	0.5	0.6	0.10
CALCRL	73	0.5	0.5	0.8	0.7	0.6	0.25
CX3CR1	130	0.5	0.7	1.0	0.3	0.6	0.41
GPR152	124	0.5	0.5	0.7	0.8	0.6	0.22
GLP1R	163	0.7	0.5	0.6	0.7	0.6	0.16
GPR64	5	0.7	0.5	0.7	0.5	0.6	0.15
GPR83	93	0.5	0.7	0.6	0.6	0.6	0.13
CMKLR1	106	0.7	0.6	0.6	0.6	0.6	0.09
F2R-L1	186	0.6	0.6	0.7	0.6	0.6	0.07
TAAR2	216	0.7	0.5	0.6	0.7	0.6	0.14
MRGPRX3	46	0.5	0.6	0.4	0.8	0.6	0.22
S1PR3	128	0.4	0.7	0.5	0.7	0.6	0.28
ADRA1B	97	0.6	0.7	0.6	0.5	0.6	0.12
PK1	39	0.5	0.7	0.6	0.5	0.6	0.15
CCR7	82	0.6	0.5	0.7	0.5	0.6	0.18
PTGER4	280	0.6	0.5	0.6	0.5	0.6	0.12
GPR68	236	0.5	0.6	0.5	0.6	0.6	0.10
P2RY4	264	0.4	0.6	0.3	0.8	0.6	0.37
HTR1A	149	0.4	0.6	0.5	0.7	0.6	0.18
HCA3	133	0.5	0.4	0.7	0.7	0.5	0.23
GCGR	123	0.5	0.5	0.3	0.7	0.5	0.26
HTR2A	174	0.6	0.6	0.6	0.4	0.5	0.15
FFA3	210	0.5	0.6	0.6	0.5	0.5	0.09
ADORA3	249	0.6	0.5	0.4	0.6	0.5	0.12
CCR4	201	0.5	0.4	0.7	0.6	0.5	0.20
NPY1R	183	0.4	0.5	0.6	0.6	0.5	0.13
GPR37L1	204	0.4	0.5	0.4	0.7	0.5	0.18
GPR142	92	0.5	0.8	0.5	0.2	0.5	0.38
GPR143	211	0.6	0.4	0.4	0.5	0.5	0.17
ADORA2B	9	0.6	0.4	0.6	0.3	0.5	0.28
GRM4	301	0.4	0.8	0.4	0.3	0.5	0.39
FSHR	218	0.4	0.5	0.6	0.5	0.5	0.12
GRM7	229	0.6	0.5	0.5	0.5	0.5	0.08
P2RY12	143	0.5	0.5	0.3	0.6	0.5	0.22
C3AR1	129	0.5	0.6	0.5	0.4	0.5	0.18
GPR124	11	0.6	0.3	0.6	0.5	0.5	0.20
NPS	103	0.6	0.6	0.3	0.4	0.5	0.27
CNR2	233	0.5	0.4	0.4	0.5	0.5	0.08
GRM6	109	0.5	0.4	0.5	0.4	0.5	0.07
GAL2	58	0.6	0.3	0.4	0.6	0.5	0.22
GRPR	117	0.5	0.5	0.4	0.4	0.5	0.08

NPFF2	70	0.4	0.4	0.4	0.5	0.4	0.05
ADRB2	25	0.4	0.4	0.3	0.5	0.4	0.14
NPY2R	191	0.4	0.4	0.4	0.4	0.4	0.07
P2RY8	168	0.4	0.4	0.5	0.3	0.4	0.23
P2RY11	31	0.4	0.4	0.3	0.5	0.4	0.16
GPR75	13	0.3	0.6	0.4	0.3	0.4	0.26
GLP2R	259	0.4	0.4	0.2	0.5	0.4	0.22
GPR50	68	0.3	0.5	0.4	0.4	0.4	0.18
GPR158	140	0.4	0.4	0.3	0.5	0.4	0.17
TAAR9	160	0.3	0.5	0.3	0.4	0.4	0.12
MRGPRG	238	0.5	0.4	0.4	0.3	0.4	0.15
OXER1	215	0.4	0.3	0.4	0.4	0.4	0.07
GPR39	85	0.4	0.4	0.4	0.3	0.4	0.19
GPR37	300	0.5	0.3	0.3	0.3	0.4	0.16
F2RL3	194	0.4	0.3	0.4	0.4	0.3	0.10
CCR5	145	0.4	0.3	0.3	0.3	0.3	0.12
TAAR8	56	0.3	0.3	0.3	0.3	0.3	0.10
RXFP1	104	0.2	0.3	0.2	0.2	0.2	0.05
Control	D2	21.2	18.6	20.7	18.8	19.8	0.06
Control	D2	17.4	19.0	18.2	18.3	18.2	0.03
Control	D2	18.4	16.6	17.3	16.5	17.2	0.04
Control	D2	17.6	15.5	16.3	16.6	16.5	0.05
Control	D2	17.5	15.1	14.8	17.6	16.3	0.08
Control	D2	15.4	16.5	14.7	14.5	15.3	0.05
Control	D2	14.0	14.8	15.0	13.2	14.2	0.05
Control	D2	14.9	14.3	12.2	14.3	13.9	0.07

Table S2. Chemical suppressor screen for mechanism of action studies on SW016789. Fold changes in glucose-stimulated InsGLuc release from MIN6 beta cells pre-exposed to either DMSO or SW016789 (5 µM) for 24 h in the presence or absence of candidate chemical suppressors.

Chemical	Target/MoA	Glucose/Basal (Chronic DMSO)			2-way ANOVA vs. DMSO adj p-value	Glucose/Basal (Chronic SW016789)			2-way ANOVA vs. DMSO adj p-value5
		mean	SD	N		mean	SD	N	
DMSO (0.1%)		7.97	2.76	39		1.81	0.62	39	
diazoxide (250 µM)	KATP opener	6.03	1.00	3	0.9703	2.27	0.81	3	0.9997
nifedipine (1 µM)	VDCC blocker	5.50	2.07	3	0.6284	3.79	1.84	3	0.9599
nifedipine (10 µM)		7.96	2.53	32	>0.9999	7.17	2.29	32	<0.0001
nifedipine (50 µM)		9.34	1.36	6	0.9801	7.90	1.72	6	<0.0001
nimodipine (1 µM)	VDCC blocker	6.98	1.77	6	0.9986	6.33	1.62	6	<0.0001
nimodipine (10 µM)		1.79	0.27	6	<0.0001	1.71	0.21	6	>0.9999
nimodipine (50 µM)		1.66	0.39	6	<0.0001	1.45	0.29	6	0.9996
azelnidipine (100 nM)	VDCC blocker	7.45	0.51	3	0.9996	2.30	0.28	3	0.9996
azelnidipine (1 µM)		2.29	0.25	3	<0.0001	2.72	0.19	3	0.9993
azelnidipine (10 µM)		1.53	0.48	3	<0.0001	1.35	0.22	3	0.9997
verapamil (10 µM)	VDCC blocker	5.40	0.57	2	0.8998	2.52	0.34	2	0.9996
verapamil (50 µM)		8.76	1.17	6	0.999	5.78	0.38	6	<0.0001
diltiazem (50 µM)	Ca2+ channel blocker	6.03	2.92	8	0.2066	2.88	0.90	8	0.998
w-Agatoxin IVA (100 nM)	P/Q-type calcium channel blocker	7.05	3.61	2	0.9994	3.07	0.12	2	0.9991
SNX-482 (100 nM)	R-type calcium channel blocker	13.63	2.43	2	0.0004	1.91	0.77	2	>0.9999
w-conotoxin MVIIC (500 nM)	N-type calcium channel blocker	7.40	0.73	2	0.9997	4.03	0.84	2	0.9822
NNC550396 (25 µM)	T-type (Cav3) calcium channel blocker	2.29	1.40	2	0.0004	0.51	0.29	2	0.999
DCPIB (50 µM)	VSAC blocker (SWELL1 inhibitor)	6.99	4.89	2	0.9994	3.49	1.93	2	0.9986
CBA (20 µM)	TRPM4 blocker	7.41	0.14	2	0.9997	3.45	1.34	2	0.9986
2-APB (100 µM)	IP3 receptor antagonist	3.61	1.48	5	<0.0001	1.40	0.35	5	0.9996
FK-506 (100 nM)	Calcineurin inhibitor	4.90	1.73	5	0.0122	1.58	0.60	5	0.9998
FK-506 (1 µM)		6.38	3.01	5	0.9523	1.64	0.45	5	0.9999
U73122 (2 µM)	PLCβ inhibitor	4.57	2.32	5	0.0024	1.43	0.47	5	0.9996
epinephrine (10 nM)	adrenergic receptor agonist	6.89	1.44	3	0.999	1.67	0.52	3	>0.9999
somatostatin (100 nM)	SST receptor agonist	7.32	1.28	3	0.9995	1.59	0.34	3	0.9999
GSK2656157 (100 nM)	PERK inhibitor	8.05	2.18	7	>0.9999	1.55	0.63	7	0.9997

Compound	Description								
ISRIB (200 nM)	eIF2B stabilizer	7.97	1.91	7	>0.9999	1.75	0.37	7	>0.9999
salubrinal (1 µM)	eIF2a phosphatase inhibitor	13.81	1.97	3	<0.0001	2.47	0.34	3	0.9995
salubrinal (50 µM)		16.43	1.35	3	<0.0001	5.54	1.11	3	0.0207
sephin 1 (1 µM)	eIF2a phosphatase inhibitor	11.43	1.70	3	0.0503	4.65	0.61	3	0.3033
sephin 1 (50 µM)		1.93	0.40	3	<0.0001	1.32	0.17	3	0.9996
TUDCA (50 µM)	bile acid / chemical chaperone	16.24	3.61	3	<0.0001	2.96	0.75	3	0.999
TUDCA (250 µM)		13.20	4.44	3	<0.0001	2.29	0.38	3	0.9997
ceapin-A7 (5 µM)	ATF6 inhibitor	8.74	2.53	4	0.9993	1.60	0.36	4	0.9998
MKC3946 (10 µM)	IRE1a inhibitor (RNAse)	5.33	1.02	4	0.1993	1.65	0.28	4	0.9999
KIRA6 (10 µM)	IRE1a inhibitor (kinase)	3.67	0.54	4	0.0002	1.57	0.49	4	0.9998
rapamycin (100 nM)	mTOR inhibitor	4.31	2.00	5	0.0006	1.44	0.50	5	0.9997
PD0325901 (1 µM)	MEK1/2 inhibitor	3.49	1.61	5	<0.0001	1.45	0.50	5	0.9997
YM-254890 (10 nM)	Gq (and G11/14) inhibitor	3.88	1.14	3	0.0053	2.49	1.59	3	0.9995
YM-254890 (100 nM)		3.63	1.34	3	0.002	2.70	1.85	3	0.9993
YM-254890 (500nM)		3.80	1.22	6	<0.0001	2.36	0.98	6	0.9994
YM-254890 (1 µM)		3.52	1.49	3	0.0012	2.56	2.00	3	0.9994
YM-58483 (10 µM)		8.50	1.56	2	0.9997	2.54	0.74	2	0.9996
CCh (100 µM)	muscarinic agonist	4.48	0.60	3	0.0459	2.35	1.20	3	0.9996
CCh (500 µM)		5.85	1.31	3	0.9015	1.83	0.72	3	>0.9999
PKI (10 µM)	Myristoylated PKA inhibitoir 14-22 amide	8.97	1.48	3	0.9991	2.23	0.30	3	0.9997
H89 (5 µM)	PKA inhibitor	9.38	1.20	3	0.9985	1.65	0.17	3	0.9999
ddAd (100 µM)	adenylyl cyclase inhibitor	7.65	0.57	3	0.9998	2.62	1.37	3	0.9994
PMA (100 nM)	PKC activator	12.34	1.06	3	0.0017	1.79	0.20	3	>0.9999
MRS 2578 (10 µM)	P2Y6 antagonist	9.77	0.76	3	0.9835	2.48	0.29	3	0.9995
MRS 2578 (50 µM)		5.96	2.73	3	0.9486	1.44	0.18	3	0.9997
ML385 (1 µM)	Nrf2 inhibitor	10.23	0.21	3	0.8061	1.82	0.08	3	>0.9999
ML385 (10 µM)		4.99	0.49	3	0.2171	1.51	0.31	3	0.9998
omaveloxolone (1 µM)	Nrf2 activator	3.64	0.66	3	0.0021	1.22	0.21	3	0.9996
omaveloxolone (10 µM)		0.95	0.03	3	<0.0001	1.04	0.36	3	0.9994
GW1100 (1 µM)	GPR40 antagonist	7.44	3.00	4	0.9996	1.57	0.42	4	0.9998
GW1100 (10 µM)		6.89	3.36	4	0.9988	3.51	1.04	4	0.9709
TAK-875 (1 µM)	GPR40 agonist	8.40	2.41	4	0.9996	1.57	0.34	4	0.9998
TAK-875 (10 µM)		8.96	3.55	4	0.999	1.50	0.04	4	0.9997
VUF11207 (1 nM)	CXCR7 agonist (CXCR4 antagonist)	8.83	2.74	4	0.9991	1.66	0.28	4	0.9999

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VUF11207 (1 µM)	7.55	2.29	4	0.9997	1.42	0.36	4	0.9997
VUF11207 (10 µM)	5.34	1.09	4	0.201	1.40	0.14	4	0.9997

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Table S3. Raw metabolomics data for SW016789-treated MIN6 cells. Raw total internal current (TIC) values for metabolomics screen.

HMDB	PubChem	KEGG	Metabolite Name	MS Transition	Samples											
					DMSO_BAS_1	DMSO_BAS_2	DMSO_BAS_3	DMSO_G30_1	DMSO_G30_2	DMSO_G30_3	SW016789_BAS_1	SW016789_BAS_2	SW016789_BAS_3	SW016789_G30_1	SW016789_G30_2	SW016789_G30_3
HMDB03331	27476	C02494	1-Methyladenosine	1-methyl-adenosine_pos-1	1.29E-03	1.16E-03	1.04E-03	1.20E-03	1.51E-03	1.55E-03	1.54E-03	2.14E-03	1.72E-03	2.13E-03	1.69E-03	1.54E-03
HMDB00699	457	C02918	1-Methylnicotinamide	1-methyl-nicotinamide_pos-3	1.58E-03	1.41E-03	2.38E-03	2.34E-03	2.26E-03	1.26E-03	1.63E-03	2.38E-03	1.14E-03	2.26E-03	1.48E-03	1.92E-03
HMDB00606	439391	C01087	2-Hydroxyglutaric acid	hydroxyglutaric acid_neg-44	1.61E-03	1.54E-03	1.24E-03	2.13E-03	2.54E-03	2.05E-03	1.64E-03	1.46E-03	1.14E-03	2.14E-03	2.67E-03	1.50E-03
HMDB00707	979	C01179	4-Hydroxyphenylpyruvic acid	hydroxyphenylpyruvate_pos-73	7.77E-04	7.28E-04	8.60E-04	7.92E-04	1.16E-03	8.42E-04	6.71E-04	8.08E-04	1.04E-03	9.90E-04	9.31E-04	7.84E-04
HMDB00725	5810	C01157	4-Hydroxyproline	hydroxy-proline_pos-74	3.48E-06	3.35E-04	4.01E-04	4.19E-06	3.64E-06	6.35E-04	3.37E-04	3.26E-06	3.93E-04	3.54E-06	3.48E-06	4.21E-04
HMDB00017	6723	C00847	4-Pyridoxic acid	4-pyridoxic acid_pos-7	1.22E-04	1.04E-04	2.03E-04	2.13E-04	1.70E-04	8.52E-05	1.94E-04	2.46E-04	2.07E-04	1.19E-04	1.38E-04	4.46E-06
HMDB01173	439176	C00170	5'-Methylthioadenosine	S-methyl-5-thioadenosine_pos-134	2.69E-02	3.47E-02	7.43E-02	5.00E-02	2.66E-02	4.75E-02	4.49E-02	4.72E-02	7.18E-02	3.89E-02	3.67E-02	5.76E-02
HMDB01107	445404	-	7-Methylguanosine	7-methylguanosine_pos-10	3.26E-04	5.50E-04	3.97E-04	3.02E-04	2.21E-04	2.70E-04	1.54E-03	1.83E-03	1.51E-03	1.62E-03	2.31E-03	1.13E-03
HMDB00895	187	C01996	Acetylcholine	acetyl-choline_pos-13	5.35E-03	4.71E-03	5.48E-03	4.72E-03	3.90E-03	4.09E-03	3.58E-03	4.76E-03	5.62E-03	6.64E-03	7.19E-03	3.91E-03
HMDB00034	190	C00147	Adenine	adenine_pos-15	1.12E-03	8.63E-04	8.89E-04	8.95E-04	1.05E-03	8.66E-04	1.01E-03	1.21E-03	1.17E-03	1.29E-03	1.06E-03	1.54E-03
HMDB00050	60961	C00212	Adenosine	adenosine_pos-16	1.53E-02	1.56E-02	1.87E-02	1.51E-02	1.97E-02	1.49E-02	1.15E-02	1.96E-02	2.40E-02	1.96E-02	2.60E-02	2.79E-02
HMDB00045	6083	C00020	Adenosine monophosphate	AMP_neg-16	3.47E-03	3.96E-03	3.44E-03	1.71E-03	1.99E-03	1.34E-03	2.81E-03	3.47E-03	4.50E-03	1.39E-03	1.54E-03	1.23E-03
HMDB00019	49	C00141	Alpha-ketoisovaleric acid	a-ketoisovaleric acid_neg-15	3.48E-06	3.35E-06	5.24E-06	1.32E-03	1.38E-03	1.11E-03	3.55E-06	3.26E-06	5.59E-06	1.82E-03	1.69E-03	1.22E-03
HMDB00510	469	C00956	Aminoadipic acid	aminoadipic acid_pos-21	2.56E-04	2.65E-04	4.21E-04	3.27E-04	2.89E-04	4.05E-04	2.16E-04	2.55E-04	4.72E-04	4.09E-04	2.78E-04	5.04E-04
HMDB01539	123831	C03626	Asymmetric dimethylarginine	Ng,Ng-dimethyl-arginine_pos-107	1.40E-04	3.34E-04	2.20E-04	6.98E-05	2.36E-04	9.49E-05	2.27E-04	2.01E-04	1.21E-04	1.82E-04	9.33E-05	1.07E-04
HMDB00043	247	C00719	Betaine	betaine_pos-26	1.79E-02	1.69E-02	2.69E-02	2.55E-02	2.62E-02	4.59E-02	2.11E-02	1.89E-02	3.09E-02	2.55E-02	2.66E-02	2.90E-02
HMDB02013	439829	C02862	Butyrylcarnitine	carnitine-C4_pos-37	1.33E-03	1.19E-03	2.47E-04	1.66E-03	3.18E-03	4.16E-04	1.09E-03	1.18E-03	2.22E-04	2.73E-03	2.08E-03	4.73E-04
HMDB0011671	NA	NA	cADP-ribose	cADP-ribose_neg-18	1.59E-03	1.60E-03	1.60E-03	1.85E-03	1.79E-03	2.32E-03	1.66E-03	1.12E-03	1.96E-03	1.76E-03	1.37E-03	1.47E-03
HMDB01096	278	C00169	Carbamoyl phosphate	carbamoylphosphate_neg-19	2.10E-04	2.64E-04	1.28E-04	2.52E-04	2.03E-04	9.13E-05	2.53E-04	2.85E-04	1.26E-04	2.51E-04	2.40E-04	5.62E-05
HMDB00062	10917	C00487	Carnitine	carnitine_pos-30	1.81E-02	2.15E-02	3.00E-02	3.15E-02	2.77E-02	2.80E-02	2.03E-02	1.67E-02	1.90E-02	3.05E-02	2.55E-02	1.94E-02
HMDB00097	305	C00114	Choline	choline_pos-41	1.43E-03	2.01E-03	1.26E-03	1.24E-03	1.43E-03	8.61E-04	1.91E-03	2.23E-03	2.97E-03	1.11E-03	1.64E-03	1.55E-03
HMDB00094	311	C00158	Citric acid	citrate-isocitrate_neg-22	3.60E-02	4.22E-02	3.85E-02	5.24E-02	6.90E-02	6.60E-02	3.47E-02	3.64E-02	2.88E-02	4.82E-02	5.80E-02	6.00E-02
HMDB00064	586	C00300	Creatine	creatine_pos-44	6.25E-03	9.22E-03	1.02E-02	4.52E-03	5.71E-03	5.63E-03	6.56E-03	6.38E-03	1.02E-02	4.13E-03	3.91E-03	4.18E-03
HMDB00562	588	C00791	Creatinine	creatinine_pos-45	1.09E-04	3.21E-04	2.99E-04	9.49E-04	5.86E-04	7.41E-04	1.17E-04	1.58E-04	1.81E-04	4.70E-04	2.96E-04	5.02E-04
HMDB00089	6175	C00475	Cytidine	cytidine_pos-49	9.49E-04	1.28E-03	1.98E-03	1.06E-03	6.18E-04	1.16E-03	1.60E-03	3.37E-03	1.04E-03	1.87E-03	1.64E-03	2.02E-03
HMDB00095	6131	C00055	Cytidine monophosphate	CMP_pos-43	1.92E-03	1.08E-03	9.29E-04	1.39E-03	1.61E-03	1.36E-03	1.26E-03	1.34E-03	6.96E-04	1.25E-03	9.23E-04	8.16E-04
HMDB00905	12599	C00360	Deoxyadenosine monophosphate	dAMP_pos-51	7.20E-04	1.24E-03	3.24E-03	1.04E-03	8.90E-04	2.41E-03	7.83E-04	9.28E-04	1.69E-03	2.10E-03	3.28E-03	1.51E-04

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HMDB00014	13711	C00881	Deoxycytidine	2-deoxycytidine_pos-6	5.95E-05	7.59E-05	1.62E-04	1.14E-04	1.16E-04	1.48E-04	8.54E-05	1.27E-04	5.43E-05	9.66E-05	1.05E-04	1.20E-04
HMDB00071	65058	C05512	Deoxyinosine	deoxyinosine_pos-52	3.48E-06	9.76E-05	7.02E-05	6.10E-05	1.38E-04	5.26E-06	1.17E-04	1.29E-04	1.94E-04	2.67E-04	1.42E-04	1.96E-04
HMDB01351	439287	C00672	Deoxyribose 1-phosphate	deoxyribose-phosphate_neg-23	5.66E-04	5.12E-04	9.71E-04	6.06E-04	4.48E-04	9.17E-04	4.14E-04	5.29E-04	1.10E-03	3.72E-04	6.18E-04	8.30E-04
HMDB00122	5793	C00031	D-Glucose	glucose-fructose_neg-36	3.48E-06	2.79E-05	5.24E-06	4.22E-04	4.28E-04	2.60E-04	3.28E-05	2.71E-05	5.59E-06	3.72E-04	3.83E-04	3.59E-04
HMDB00127	444791	C00191	D-Glucuronic acid	glucuronate_neg-38	3.23E-04	2.68E-04	1.83E-04	4.38E-04	5.71E-04	5.13E-04	2.93E-04	2.95E-04	1.67E-04	4.55E-04	4.47E-04	5.34E-04
HMDB03339	23327	C00217	D-Glutamic acid	glutamate_neg-39	1.68E-02	1.58E-02	1.77E-02	1.73E-02	1.20E-02	1.60E-02	1.73E-02	1.50E-02	1.58E-02	1.25E-02	1.14E-02	1.34E-02
HMDB01473	668	C00111	Dihydroxyacetone phosphate	dihydroxyacetone-phosphate_neg-25	2.40E-04	3.19E-04	6.49E-04	4.57E-04	3.54E-04	7.18E-04	3.25E-04	2.58E-04	6.51E-04	4.04E-04	3.39E-04	5.25E-04
HMDB00092	673	C01026	Dimethylglycine	dimethylglycine_pos-54	2.85E-03	2.73E-03	2.44E-03	1.93E-03	1.97E-03	1.65E-03	2.97E-03	2.42E-03	3.24E-03	2.28E-03	2.22E-03	5.63E-03
HMDB01548	439167	C00117	D-Ribose 5-phosphate	ribose 5-phosphate_neg-66	1.11E-04	1.18E-04	2.25E-04	4.19E-06	3.64E-06	1.46E-04	1.14E-04	8.75E-05	2.40E-04	8.19E-05	3.48E-06	4.46E-06
HMDB01068	22833559	C00281	D-Sedoheptulose 7-phosphate	sedoheptulose-7-phosphate_neg-68	1.99E-04	2.80E-04	2.60E-04	2.50E-04	1.71E-04	2.91E-04	2.17E-04	2.11E-04	3.28E-04	1.84E-04	2.63E-04	2.85E-04
HMDB00121	6037	C00504	Folic acid	folic acid_pos-57	3.76E-04	3.94E-04	2.98E-04	3.04E-04	4.12E-04	2.38E-04	4.42E-04	3.68E-04	4.26E-04	2.96E-04	3.22E-04	2.85E-04
HMDB01058	172313	C00354	Fructose 1,6-bisphosphate	fructose-1,6-biphosphate_neg-27	3.48E-06	2.17E-05	4.12E-05	2.67E-04	3.33E-04	4.57E-04	3.55E-06	3.26E-06	6.72E-05	3.37E-04	3.80E-04	2.17E-04
HMDB00645	123912	C00446	Galactose 1-phosphate	galactose 1-phosphate_neg-30	1.24E-04	1.22E-04	6.78E-05	1.11E-04	1.75E-04	2.17E-04	1.18E-04	9.65E-05	1.68E-04	1.32E-04	1.40E-04	4.33E-05
HMDB00112	119	C00334	Gamma-Aminobutyric acid	γ-aminobutyric acid_pos-155	5.12E-03	6.72E-03	5.94E-03	4.67E-03	6.56E-03	5.73E-03	5.61E-03	7.00E-03	1.16E-02	6.85E-03	7.08E-03	9.32E-03
HMDB00625	10690	C00257	Gluconic acid	gluconic acid_neg-34	1.24E-04	4.72E-05	1.67E-04	6.97E-05	3.64E-06	1.14E-04	9.85E-05	3.26E-06	1.60E-04	3.76E-05	3.48E-06	4.46E-06
HMDB01401	5958	C00092	Glucose 6-phosphate	G6P-F6P_neg-29	6.75E-05	5.11E-05	7.02E-05	5.70E-04	3.53E-04	6.55E-04	2.79E-05	6.33E-05	3.62E-05	4.13E-04	3.88E-04	4.09E-04
HMDB00125	124886	C00051	Glutathione	GSH_pos-64	3.12E-02	1.26E-02	2.02E-02	1.64E-02	1.51E-02	3.01E-02	1.67E-02	1.31E-02	2.71E-02	1.64E-02	1.69E-02	1.88E-02
HMDB00126	439162	C00093	Glycerol 3-phosphate	sn-glycero3-phosphate_neg-69	2.11E-04	2.23E-04	4.02E-04	1.90E-04	1.09E-04	1.48E-04	3.51E-04	2.35E-04	4.60E-04	1.47E-04	1.67E-04	1.39E-04
HMDB00086	71920	C00670	Glycerophosphocholine	glycerophosphorylcholine_pos-61	8.38E-02	7.55E-02	4.72E-02	5.81E-02	5.82E-02	4.07E-02	6.16E-02	6.49E-02	2.65E-02	6.85E-02	6.22E-02	3.76E-02
HMDB00123	750	C00037	Glycine	glycine_pos-62	1.82E-04	2.06E-04	2.94E-04	1.57E-04	1.55E-04	1.29E-04	1.58E-04	1.67E-04	1.47E-04	1.32E-04	1.01E-04	1.90E-04
HMDB00119	760	C00048	Glyoxylic acid	glyoxylate_neg-42	3.48E-06	3.35E-06	5.24E-06	2.46E-04	2.66E-04	1.80E-04	3.28E-05	3.26E-06	7.75E-05	3.34E-04	1.51E-04	3.47E-04
HMDB00128	763	C00581	Guanidoacetic acid	guanidoacetic acid_pos-66	1.98E-03	2.26E-03	1.10E-03	2.53E-03	2.66E-03	1.01E-03	2.48E-03	1.68E-03	1.53E-03	1.89E-03	2.37E-03	1.54E-03
HMDB00132	764	C00242	Guanine	guanine_pos-67	9.78E-04	1.16E-03	6.25E-04	6.40E-04	6.79E-04	2.26E-04	1.08E-03	9.94E-04	5.19E-04	6.16E-04	6.08E-04	2.29E-04
HMDB00133	6802	C00387	Guanosine	guanosine_pos-68	5.85E-03	9.17E-03	3.39E-03	1.06E-02	5.31E-03	6.52E-03	1.60E-02	1.69E-02	6.75E-03	2.11E-02	2.03E-02	1.45E-02
HMDB00157	790	C00262	Hypoxanthine	hypoxanthine_pos-75	2.26E-03	1.08E-03	2.47E-03	1.13E-03	1.43E-03	8.83E-04	2.06E-03	1.76E-03	3.27E-03	1.62E-03	2.14E-03	1.04E-03
HMDB00738	798	C00463	Indole	indole_pos-79	7.86E-04	8.57E-04	4.96E-04	8.10E-04	8.64E-04	4.82E-04	7.39E-04	7.31E-04	5.21E-04	7.99E-04	9.18E-04	5.93E-04
HMDB00195	6021	C00294	Inosine	inosine_pos-90	3.89E-03	2.62E-03	1.43E-03	4.59E-03	3.53E-03	9.84E-03	1.17E-02	8.08E-03	3.66E-03	7.77E-03	7.33E-03	7.64E-03
HMDB00175	8582	C00130	Inosinic acid	IMP_pos-78	1.19E-02	1.59E-02	1.43E-02	5.27E-03	6.57E-03	5.42E-03	1.03E-02	1.12E-02	9.58E-03	3.80E-03	4.45E-03	4.65E-03
HMDB00688	6426851	-	Isovalerylcarnitine	carnitine-C5_pos-38	7.73E-04	1.77E-03	3.56E-04	1.60E-03	2.93E-03	7.98E-04	1.09E-03	1.33E-03	4.24E-04	3.16E-03	2.08E-03	7.10E-04
HMDB00748	643327	C05607	L-3-Phenyllactic acid	phenyl-lactic acid_neg-58	1.04E-03	8.35E-04	1.50E-03	1.11E-03	1.31E-03	1.10E-03	1.22E-03	8.36E-04	2.02E-03	9.50E-04	1.23E-03	1.26E-03
HMDB00201	1	C02571	L-Acetylcarnitine	acetyl-carnitine_pos-12	1.71E-01	1.24E-01	1.52E-01	1.31E-01	9.27E-02	1.39E-01	1.83E-01	1.60E-01	1.38E-01	1.35E-01	1.05E-01	1.57E-01
HMDB00161	5950	C00041	L-Alanine	alanine_pos-19	7.81E-04	7.40E-04	1.38E-03	9.96E-04	8.70E-04	1.39E-03	7.05E-04	6.51E-04	1.25E-03	7.72E-04	7.99E-04	1.04E-03

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HMDB00517	6322	C00062	L-Arginine	arginine_pos-22	3.46E-03	3.39E-03	2.56E-03	2.16E-03	2.21E-03	1.27E-03	2.08E-03	2.09E-03	1.89E-03	1.81E-03	1.50E-03	8.87E-04
HMDB00168	6267	C00152	L-Asparagine	asparagine_pos-23	1.01E-02	9.13E-03	5.46E-03	1.07E-02	9.93E-03	6.17E-03	8.87E-03	8.14E-03	6.31E-03	8.93E-03	1.02E-02	8.41E-03
HMDB00191	5960	C00049	L-Aspartic acid	aspartate_pos-24	2.09E-03	1.79E-03	2.84E-03	1.12E-03	9.93E-04	1.64E-03	1.17E-03	1.65E-03	2.65E-03	1.00E-03	6.72E-04	1.35E-03
HMDB00099	439258	C02291	L-Cystathionine	cystathionine _pos-46	1.24E-03	8.77E-04	1.51E-03	2.26E-03	1.56E-03	1.81E-03	1.75E-03	1.49E-03	1.28E-03	1.43E-03	1.15E-03	1.59E-03
HMDB00574	5862	C00097	L-Cysteine	cysteine_pos-47	6.43E-05	9.14E-05	8.72E-05	4.19E-06	3.64E-06	5.26E-06	6.40E-05	1.01E-04	8.53E-05	4.26E-05	3.48E-06	4.46E-06
HMDB00641	5961	C00064	L-Glutamine	glutamine_pos-60	1.42E-03	1.95E-03	7.78E-04	1.39E-03	2.82E-03	1.23E-03	1.11E-03	1.19E-03	9.24E-04	1.20E-03	2.39E-03	9.97E-04
HMDB00756	3246938	-	L-Hexanoylcarnitine	carnitine-C6_pos-39	3.40E-03	2.70E-03	2.70E-03	1.83E-03	1.37E-03	1.21E-03	3.94E-03	2.77E-03	3.38E-03	2.33E-03	1.98E-03	9.37E-04
HMDB00177	6274	C00135	L-Histidine	histidine_pos-69	1.44E-04	2.06E-04	5.24E-06	1.47E-04	1.63E-04	1.36E-04	1.24E-04	1.53E-04	1.49E-04	1.72E-04	1.77E-04	1.28E-04
HMDB00719	12647	C00263	L-Homoserine	homoserine_pos-72	9.73E-04	1.09E-03	7.48E-04	7.71E-04	8.08E-04	6.78E-04	9.36E-04	8.29E-04	5.12E-04	8.11E-04	7.80E-04	7.93E-04
HMDB00172	6306	C00407	L-Isoleucine	isoleucine_pos-91	8.79E-02	1.09E-01	5.70E-02	9.63E-02	1.04E-01	5.65E-02	9.13E-02	9.36E-02	6.73E-02	1.06E-01	9.98E-02	7.69E-02
HMDB00190	107689	C00186	L-Lactic acid	lactate_neg-48	3.08E-04	2.78E-04	7.05E-04	2.69E-03	2.52E-03	3.09E-03	2.24E-04	1.67E-04	8.35E-04	3.09E-03	2.41E-03	4.02E-03
HMDB00182	5962	C00047	L-Lysine	lysine_pos-96	3.45E-03	3.98E-03	2.43E-03	1.42E-03	1.36E-03	1.04E-03	2.22E-03	2.05E-03	1.48E-03	1.14E-03	1.88E-03	9.41E-04
HMDB00156	222656	C00149	L-Malic acid	malic acid_neg-49	3.48E-06	3.35E-06	5.24E-06	7.70E-04	8.63E-04	6.01E-04	3.55E-06	3.26E-06	5.59E-06	8.76E-04	8.73E-04	6.54E-04
HMDB00696	6137	C00073	L-Methionine	methionine_pos-98	2.45E-03	3.34E-03	1.60E-03	3.39E-03	4.07E-03	2.23E-03	3.61E-03	3.40E-03	1.62E-03	3.27E-03	3.35E-03	2.28E-03
HMDB00791	11953814	C02838	L-Octanoylcarnitine	carnitine-C8_pos-40	1.98E-03	2.37E-03	1.11E-03	2.29E-03	1.62E-03	6.47E-04	2.32E-03	2.16E-03	1.26E-03	1.41E-03	1.23E-03	1.09E-03
HMDB00159	6140	C00079	L-Phenylalanine	phenyl-alanine_pos-113	1.66E-02	1.87E-02	1.06E-02	2.51E-02	2.29E-02	9.32E-03	1.91E-02	1.44E-02	1.20E-02	2.44E-02	1.82E-02	1.49E-02
HMDB00162	145742	C00148	L-Proline	proline_pos-118	6.03E-02	7.42E-02	5.60E-02	5.31E-02	8.30E-02	5.27E-02	5.26E-02	6.46E-02	4.56E-02	5.04E-02	5.87E-02	3.92E-02
HMDB00187	5951	C00065	L-Serine	serine_pos-130	6.94E-04	5.16E-04	7.63E-04	1.25E-03	6.35E-04	6.45E-04	4.95E-04	7.68E-04	1.12E-03	6.07E-04	8.32E-04	5.80E-04
HMDB00158	6057	C00082	L-Tyrosine	tyrosine_pos-146	8.80E-03	8.59E-03	8.35E-03	1.17E-02	1.28E-02	6.85E-03	1.00E-02	1.13E-02	1.05E-02	8.35E-03	1.32E-02	1.05E-02
HMDB00883	6287	C00183	L-Valine	valine_pos-152	1.84E-03	1.90E-03	1.36E-03	1.74E-03	2.43E-03	1.28E-03	1.73E-03	1.99E-03	1.04E-03	1.95E-03	1.79E-03	1.51E-03
HMDB02005	847	-	Methionine sulfoxide	methionine sulfoxide_pos-97	2.96E-04	3.45E-04	3.85E-04	3.98E-04	4.11E-04	3.99E-04	3.14E-04	4.69E-04	3.49E-04	3.36E-04	3.35E-04	3.08E-04
HMDB00211	892	C00137	Myoinositol	myo-inositol_pos-99	2.12E-04	4.25E-04	4.53E-04	3.68E-04	4.63E-04	2.90E-04	3.38E-04	3.76E-04	3.41E-04	3.45E-04	3.55E-04	6.11E-04
HMDB01325	440120	C03793	N6,N6,N6-Trimethyl-L-lysine	trimethyllysine_pos-144	2.87E-03	3.44E-03	2.15E-03	3.70E-03	3.83E-03	1.68E-03	2.17E-03	2.51E-03	1.68E-03	2.74E-03	2.36E-03	1.47E-03
HMDB00215	439174	C00140	N-Acetyl-D-glucosamine	N-acetyl-D-glucosamine 1-phosphate _neg-54	1.42E-04	1.37E-04	2.03E-04	7.69E-05	8.10E-05	8.89E-05	2.55E-04	1.10E-04	2.44E-04	3.95E-05	6.86E-05	6.39E-05
HMDB00766	88064	C00624	N-Acetyl-L-alanine	N-acetyl-alanine_neg-53	5.41E-04	3.77E-04	5.84E-04	6.59E-04	5.15E-04	9.46E-04	2.69E-04	3.74E-04	4.53E-04	7.20E-04	3.34E-04	3.43E-04
HMDB00812	65065	C01042	N-Acetyl-L-aspartic acid	N-acetyl-aspartic acid_pos-101	7.25E-04	5.25E-04	2.82E-04	2.88E-04	6.03E-04	8.21E-04	5.29E-04	7.96E-04	1.11E-03	7.02E-04	6.50E-04	4.66E-04
HMDB00902	5893	C00003	NAD	NAD_pos-105	1.30E-01	1.43E-01	1.65E-01	1.57E-01	1.52E-01	1.83E-01	1.24E-01	1.27E-01	1.70E-01	1.33E-01	1.61E-01	1.49E-01
HMDB00446	192590	C12989	N-Alpha-acetyllysine	acetyllysine_pos-14	2.68E-03	2.57E-03	1.74E-03	2.13E-03	2.81E-03	1.48E-03	2.05E-03	2.06E-03	1.54E-03	1.63E-03	2.18E-03	1.05E-03
HMDB01406	936	C00153	Niacinamide	nicotinamide_pos-108	7.08E-04	1.05E-03	7.10E-04	1.35E-03	1.58E-03	2.21E-03	9.36E-04	1.00E-03	3.02E-04	1.25E-03	8.50E-04	7.52E-04
HMDB00214	6262	C00077	Ornithine	ornithine_pos-111	2.95E-04	2.53E-04	3.54E-04	1.82E-04	2.15E-04	1.37E-04	1.44E-04	1.98E-04	1.99E-04	1.39E-04	9.97E-05	1.35E-04
HMDB03337	975	C00127	Oxidized glutathione	GSSG_pos-65	1.30E-03	3.36E-03	1.99E-03	6.08E-04	1.37E-03	1.34E-03	1.32E-03	1.76E-03	3.00E-03	9.54E-04	5.73E-04	1.37E-03
HMDB00208	51	C00026	Oxoglutaric acid	a-keto-glutarate_neg-14	1.60E-04	2.11E-04	5.24E-06	5.20E-04	8.14E-04	5.54E-04	9.69E-05	1.50E-04	5.59E-06	5.41E-04	6.65E-04	3.54E-04

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HMDB00210	988	C00864	Pantothenic acid	pantothenic acid_pos-112	2.79E-02	2.46E-02	2.39E-02	3.43E-02	3.08E-02	2.47E-02	2.21E-02	2.54E-02	2.00E-02	2.90E-02	2.55E-02	3.64E-02
HMDB01511	587	C02305	Phosphocreatine	phospho-creatine_neg-60	1.11E-04	1.24E-04	1.59E-04	4.31E-04	3.87E-04	4.40E-04	8.54E-05	1.55E-04	8.01E-05	3.00E-04	3.04E-04	3.81E-04
HMDB01565	1014	C00588	Phosphorylcholine	phosphorylcholine_pos-115	2.33E-02	2.01E-02	4.01E-02	1.73E-02	2.16E-02	3.22E-02	2.31E-02	1.73E-02	4.40E-02	2.38E-02	1.27E-02	4.70E-02
HMDB00070	849	C00408	Pipecolic acid	pipecolic acid_pos-116	7.90E-03	5.44E-03	5.08E-03	6.95E-03	8.67E-03	6.26E-03	6.46E-03	6.33E-03	4.31E-03	6.98E-03	5.91E-03	5.32E-03
HMDB00824	107738	C03017	Propionylcarnitine	carnitine-C3_pos-36	3.31E-02	2.93E-02	9.61E-03	9.61E-03	1.31E-02	3.39E-03	3.09E-02	4.00E-02	2.48E-02	1.62E-02	2.16E-02	4.66E-03
HMDB13305	75612	-	Propionylcholine	propionylcholine_pos-119	1.08E-02	1.14E-02	1.13E-02	1.27E-02	1.31E-02	1.32E-02	1.09E-02	1.20E-02	1.11E-02	1.10E-02	1.27E-02	1.04E-02
HMDB01414	1045	C00134	Putrescine	putrescine_pos-121	1.32E-04	1.73E-04	2.42E-04	1.69E-04	1.82E-04	1.70E-04	1.77E-04	1.69E-04	2.51E-04	1.08E-04	4.04E-04	1.03E-04
HMDB01431	1052	C00534	Pyridoxamine	pyridoxamine_pos-122	1.11E-04	1.78E-04	5.24E-06	2.65E-04	3.58E-04	2.94E-04	9.19E-05	1.06E-04	5.59E-06	2.37E-04	3.62E-04	1.97E-04
HMDB00232	1066	C03722	Quinolinic acid_pos-125	quinolinate_pos-125	4.40E-04	2.35E-04	6.94E-04	9.00E-04	7.32E-04	1.15E-03	4.10E-04	3.69E-04	4.70E-04	6.97E-04	5.15E-04	6.65E-04
HMDB00244	493570	C00255	Riboflavin	riboflavin_pos-127	2.85E-04	2.43E-04	3.08E-04	3.49E-04	3.62E-04	2.07E-04	8.84E-04	6.92E-04	5.45E-04	4.77E-04	8.98E-04	3.18E-04
HMDB00939	439155	C00021	S-Adenosylhomocysteine	S-adenosyl-homocysteine_neg-67	6.63E-04	7.63E-04	1.64E-03	6.92E-04	5.99E-04	1.04E-03	1.09E-03	9.23E-04	2.70E-03	5.65E-04	5.60E-04	1.11E-03
HMDB01185	16757548	C00019	S-Adenosylmethionine	S-adenosyl-methionine_pos-128	7.40E-03	1.21E-02	1.07E-02	8.25E-03	1.86E-02	1.81E-02	1.22E-02	8.92E-03	1.51E-02	8.63E-03	9.65E-03	1.86E-02
HMDB03070	8742	C00493	Shikimic acid	shikimic acid_pos-131	1.13E-02	8.70E-03	9.38E-03	6.23E-03	6.24E-03	4.53E-03	6.70E-03	8.18E-03	5.65E-03	5.03E-03	4.05E-03	3.11E-03
HMDB01066	440018	C03451	S-Lactoylglutathione	S-lactoylglutathione _pos-133	3.48E-06	3.35E-06	5.24E-06	1.84E-03	1.83E-03	3.00E-03	3.55E-06	3.26E-06	5.59E-06	2.01E-03	1.18E-03	2.20E-03
HMDB01257	1102	C00315	Spermidine	spermidine_pos-135	8.12E-03	1.34E-02	1.22E-02	8.27E-03	1.24E-02	1.42E-02	1.23E-02	1.40E-02	2.50E-02	1.51E-02	1.75E-02	1.44E-02
HMDB01256	1103	C00750	Spermine	spermine_pos-136	1.44E-03	1.78E-03	3.24E-03	5.26E-03	3.15E-03	3.81E-03	3.29E-03	4.43E-03	2.81E-03	2.25E-03	7.24E-03	1.71E-03
HMDB00848	6426855	-	Stearoylcarnitine	carnitine-C18_pos-34	9.05E-04	7.81E-04	4.19E-04	3.64E-04	1.89E-04	1.73E-04	9.93E-04	9.43E-04	4.96E-04	3.90E-04	1.22E-04	2.02E-04
HMDB00254	1110	C00042	Succinic acid	succinate_neg-70	2.54E-03	2.71E-03	2.16E-03	2.27E-03	3.48E-03	3.62E-03	2.82E-03	2.38E-03	2.26E-03	2.73E-03	4.66E-03	2.69E-03
HMDB00251	1123	C00245	Taurine	taurine_neg-71	2.67E-02	2.29E-02	3.47E-02	2.65E-02	2.33E-02	2.79E-02	2.73E-02	2.17E-02	3.17E-02	2.34E-02	2.11E-02	2.52E-02
HMDB05066	53477791	-	Tetradecanoylcarnitine	carnitine-C14_pos-32	7.75E-04	1.47E-03	5.06E-04	2.77E-04	3.20E-04	2.80E-04	6.72E-04	1.11E-03	4.65E-04	4.04E-04	1.33E-04	3.08E-04
HMDB00235	1130	C00378	Thiamine	thiamine_pos-139	5.75E-04	6.64E-04	4.65E-04	5.81E-04	5.41E-04	3.83E-04	3.66E-04	5.01E-04	3.67E-04	5.55E-04	6.79E-04	2.29E-04
HMDB00273	5789	C00214	Thymidine	thymidine_pos-142	6.75E-05	9.91E-05	5.24E-06	4.19E-06	7.24E-05	5.26E-06	7.64E-05	1.12E-04	6.46E-05	1.26E-04	1.20E-04	4.46E-06
HMDB00300	1174	C00106	Uracil	uracil_pos-147	1.83E-04	9.91E-05	8.72E-05	6.20E-05	3.64E-06	9.00E-05	1.13E-04	9.65E-05	1.65E-04	3.54E-06	6.92E-05	6.40E-05
HMDB00296	6029	C00299	Uridine	uridine_neg-77	3.48E-06	3.25E-05	5.24E-06	2.71E-05	2.19E-05	5.11E-05	6.40E-05	3.77E-05	2.07E-05	3.77E-05	4.02E-05	4.33E-05
HMDB00295	6031	C00015	Uridine 5'-diphosphate	UDP_neg-72	8.68E-05	8.98E-05	7.26E-05	1.09E-04	9.93E-05	8.52E-05	8.37E-05	5.73E-05	1.45E-04	1.24E-04	3.59E-04	7.43E-05
HMDB00292	1188	C00385	Xanthine	xanthine_neg-78	2.80E-04	3.55E-04	1.69E-04	2.50E-04	2.71E-04	1.07E-04	3.25E-04	3.20E-04	2.92E-04	2.42E-04	2.61E-04	1.44E-04
HMDB00299	64959	C01762	Xanthosine	xanthosine_pos-154	4.16E-04	4.56E-04	1.79E-04	6.49E-04	5.54E-04	7.28E-04	3.28E-04	4.41E-04	3.62E-05	4.42E-04	1.07E-03	5.18E-04

Table S4. Research material sources. All information pertaining to chemical reagents, antibodies, qPCR primers, and donor human islets.

Reagents

Name	Company	Catalog#
2-APB	Sigma	100065
Antimycin A	Sigma	A8674
azelnidipine	Fisher	AC465060010
carbachol	Sigma	C-4382
CBA	Tocris	6724
ceapin-A7	Sigma	SML2330-5MG
coelenterazine	Nanolight	3035MG
coelenterazine-h	Promega	S2011
DCPIB	Tocris	1540/10
diazoxide	Sigma	D9035
dideoxyadenosine	Santa Cruz Biotechnology	c-201562
diltiazem	Fisher	AC329080010
epinephrine	Sigma	E4375
FCCP	Fisher	NC0904863
FK-506	LC Labs	F-4900
forskolin	Sigma	F3917-10MG
FPL64176	Cayman	20122
fura-2-LR-AM	Fisher	34-491-11SET
GSK2656157	Sigma	5046510001
GW1100	Fisher	50-190-5117
H89	Sigma	B1427
IBMX	Sigma	I5879
ISRIB	Sigma	SML0843
KIRA6	Sigma	5322810001
MKC3946	Sigma	5327580001
ML385	Medchem Express	HY1005235MG
MRS 2578	Selleck	S285510MG
nifedipine	Sigma	N7634-1G

nimodipine	Acros	329280010
NNC550396	Santa Cruz Biotechnology	sc-203647A
oligomycin	Sigma	O4876
omaveloxolone	Apexbio	B3576
PD0325901	LC Labs	P-9688
PKI (myr-PKA inhibitor 14-22 amide)	Fisher	47-648-5500UG
PMA (phorbol 12-myristate)	Sigma	P1585
rapamycin	LC Labs	R-5000
salubrinal	Fisher	50-101-1234
sephin 1	Sigma	SML1356
SNX-482	Tocris	2945
somatostatin	Fisher	11-571-R
SW016789	Chembridge	CB 5785370
TAK-875	Fisher	NC1376701
thapsigargin	Fisher	50-464-293
TUDCA	Fisher	NC1266953
U73122	Sigma	U6881
verapamil	Sigma	V4629
VUF11207	Sigma	SML0669
YM-254890	Fisher	50-149-0016
ω-Agatoxin IVA	Tocris	2799
ω-conotoxin MVIIC	Fisher	50-168-6383
Cell Titer Glo	Fisher	PR-G7572
Multitox Fluor	Promega	G9200
2X Sybr qPCR master mix	Bio-Rad\	1725125

Antibodies

Protein	Host Species	kDa	Company	Cat#	RRID	Dilution
CHOP	mouse	27	Cell Signaling Technology	2895	AB_2089254	1:1000
PARP (cleaved) mouse	mouse	89	Cell Signaling Technology	9548	AB_2160592	1:1000
BclXL (54H6)	rabbit	30	Cell Signaling Technology	2764	AB_2228008	1:1000
PERK (pThr980)	rabbit	170	Cell Signaling Technology	3179	AB_2095853	1:1000

anti-total PERK	rabbit	170	Cell Signaling Technology	3192	AB_2095847	1:1000
GRP78 / BiP	rabbit	78	Cell Signaling Technology	3177	AB_2119845	1:1000
ATF3	rabbit	23.24	Cell Signaling Technology	33593	AB_2799039	1:2000
ATF4	rabbit	49	Cell Signaling Technology	11815	AB_2616025	1:2000
Actin	mouse	42	Sigma	A2228	AB_476697	1:2000
MafA	goat	36-47	Santa Cruz	sc-27140	AB_2133149	1:250
Pdx1	goat	46	Santa Cruz	sc-14662	AB_653988	1:1000
eIF2a-pS51	rabbit	38	Cell Signaling Technology	3398	AB_2096481	1:1000
GAPDH	mouse	37	Cell Signaling Technology	97166	AB_2756824	1:1000

qPCR Primer Sequences

Gene name	Species	Fwd and Rev 5'->3'	Amplicon	Source
Atf3	Mouse	TGGAGATGTCAGTCACCAAGTCT	88	Primerblast: NM_007498.3
		GCAGCAGCAATTTTATTTCTTTCT		
Atf4	Mouse	ACTCTAATCCCTCCATGTGTAAAGG	84	Primerblast:NM_001287180.1
		CAGGTAGGACTCTGGGCTCAT		
Xbp1s	Mouse	CTGAGTCCGCAGCAGGT	66	PMID: 17890727
		TGTCAGAGTCCATGGGAAGA		
Fos	Mouse	CGGGTTTCAACGCCGACTA	166	Primerbank: 6753894a1
		TTGGCACTAGAGACGGACAGA		
Dusp1	Mouse	GTTGTTGGATTGTCGCTCCTT	129	Primerbank: 7305423a1
		TTGGGCACGATATGCTCCAG		
Npas4	Mouse	CTCTGGATGCTGATCGCCTT	117	Primerblast:NM_153553.5
		CAGGTGGGTGAGCATGGAAT		
Nr4a1	Mouse	CTGCGAAAGTTGGGGGAGT	126	Primerblast:NM_010444.2
		CTTGAATACAGGGCATCTCCAG		
Nr4a3	Mouse	GCTGTGACTCTCCCCCAATC	88	Primerblast:NM_015743.3
		AGTGGGCTTTGGGTGCTG		
Npas4	Mouse	CTCTGGATGCTGATCGCCTT	117	Primerblast:NM_153553.5
		CAGGTGGGTGAGCATGGAAT		
Ddit3	Mouse	CACCACACCTGAAAGCAGAAC	65	PMCID: PMC2582538
		GGTGAAAGGCAGGGACTCA		

Gene	Species	Primer	Product	Reference
Hspa5	Mouse	TGGAGTTCCCCAGATTGAAG	728	PMCID: PMC2798684
		CCTGACCCACCTTTTTCTCA		
Txnip	Mouse	TCTTTTGAGGTGGTCTTCAACG	104	Primerbank: 13994378a1
		GCTTTGACTCGGGTAACTTCACA		
Mct1	Mouse	ACGCCGGAGTCTTTGGATTT	162	Primerblast:NM_009196.4
		TGAGGCGGCCTAAAAGTGG		
XBP1S	Human	GCTGAGTCCGCAGCAGGT	130	PMCID: PMC6645673
		CTGGGTCCAAGTTGTCCAGAAT		
SST	Human	ACCCAACCAGACGGAGAATGA	108	Primerbank: 71979669c1
		GCCGGGTTTGAGTTAGCAGA		
DDIT3	Human	GGAAACAGAGTGGTCATTCCC	116	Primerbank: 304282228c1
		CTGCTTGAGCCGTTCATTCTC		
HSPA5	Human	ATCAACGAGCCTACGGCAG	197	Primerblast:NM_005347.5
		TCCATGACACGCTGGTCAAA		

Checklist for reporting human islet preparations used in research

Adapted from Hart NJ, Powers AC (2018) Progress, challenges, and suggestions for using human islets to understand islet biology and human diabetes. Diabetologia https://doi.org/10.1007/s00125-018-4772-2

Islet preparation	1	2	3	4	5	6	7	8	9
MANDATORY INFORMATION									
Unique identifier	SAMN09091256	SAMN09228907	SAMN09370567	SAMN10784981	SAMN10977276	SAMN15770453	SAMN15851500	SAMN15877725	SAMN15894111
Donor age (years)	45	62	32	45	52	48	33	31	58
Donor sex (M/F)	Male	Male	Male	Female	Male	Female	Female	Male	Female
Donor BMI (kg/m^2)	29.3	36.1	28.5	35.7	27.2	30.9	44.2	27.4	26.8
Donor HbA$_{1c}$ or other measure of blood glucose control	5.0%	5.8%	5.2%	5.7%	5.7%	5.8%	5.3%	5.6%	5.5%
Origin/source of islets[b]	IIDP	IIDP	IIDP	IIDP	IIDP	IIDP	IIDP	IIDP	IIDP
Islet isolation centre	Scharp-Lacy	Scharp-Lacy	University of Wisconsin	Scharp-Lacy	Southern California Islet Cell Resource Center	University of Wisconsin	University of Wisconsin	University of Wisconsin	Scharp-Lacy
Donor history of diabetes? Please select yes/no from drop down list	No	No	No	No	No	No	No	No	No
If Yes, complete the next two lines if this information is available									
Diabetes duration (years)									
Glucose-lowering therapy at time of death[c]									

RECOMMENDED INFORMATION								
Donor cause of death	cerebrovascular/ stroke	anoxia	head trauma	cerebrovascular/ stroke	cerebrovascular/ stroke	cerebrovascular/ stroke	anoxia	head trauma	cerebrovascular/ stroke
Warm ischaemia time (min)	No	No	5	No	No	yes, unknown	15	No	No
Cold ischaemia time (min)	655	643	690	672	486	328	353	465	552
Estimated purity (%)	90	90	95	90	85	90	85	95	90
Estimated viability (%)	95	95	91	95	96	99	98	98	95
Total culture time prior to shipment (d,h)[d]	2d	2d 17h	20 h	3d 7h	21h	1d 9h	1d 18h	2d 16h	2d 23h
Glucose-stimulated insulin secretion from IIDP	1.8	3.9	1.8	7.2	2.8	5.4	1.8	2.2	5.9
Handpicked to purity? Please select yes/no from drop down list	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Additional notes: Associated Figure:	Fig 1D	Fig 1D	Fig 1D	Fig 8E	Fig 8E	Fig 8E	Fig 8E	Fig 8E	Fig 8E

[a]If you have used more than eight islet preparations, please complete additional forms as necessary
[b]For example, IIDP, ECIT, Alberta IsletCore
[c]Please specify the therapy/therapies
[d]Time of islet culture at the isolation centre, during shipment and at the receiving laboratory
[e]Please specify the test and the results

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