The human placenta dictates the phenotype of decidual macrophages.

Sigrid Vondra[1], Anna-Lena Höbler[1], Andreas Ian Lackner[1], Johanna Raffetseder[2], Zala Nikita

Mihalic[3], Leila Saleh[4], Victoria Kunihs[4], Peter Haslinger[1], Markus Wahrmann[5], Heinrich

Husslein[6], Raimund Oberle[7], Julia Kargl[3], Sandra Haider[4], Paulina Latos[8], Martin Knöfler[4],

Jan Ernerudh[9], Jürgen Pollheimer[1]*

[1]Department of Obstetrics and Gynecology, Reproductive Biology Unit, Maternal-fetal

Immunology Group, Medical University of Vienna, Austria; [2]Division of Inflammation and

Infection (II), Department of Biomedical and Clinical Sciences (BKV), Linköping University,

Linköping, Sweden. [3]Otto Loewi Research Center, Division of Pharmacology, Medical

University of Graz, Austria. [4]Department of Obstetrics and Gynecology, Reproductive Biology

Unit, Placental Development Group, Medical University of Vienna, Austria; [5]Division of

Nephrology and Dialysis, Department of Medicine III, Medical University of Vienna, Vienna,

Austria; [6]Department of Obstetrics and Gynecology, Medical University of Vienna, Vienna,

Austria; [7]Center for Pathobiochemistry and Genetics, Institute of Medical Chemistry, Medical

University of Vienna, Austria; [8]Center for Anatomy and Cell Biology, Medical University of

Vienna, A-1090 Vienna, Austria [9]Department of Clinical Immunology and Transfusion

Medicine, Department of Biomedical and Clinical Sciences, Linköping University, Linköping,

Sweden.

Short title: The placenta induces decidual macrophages

* Correspondence to Jürgen Pollheimer: juergen.pollheimer@muv.ac.at

Abstract

During human pregnancy, placenta-derived extravillous trophoblasts (EVT) invade the decidua and communicate with maternal immune cells. The decidua can be distinguished into basalis (decB) and parietalis (decP), the latter being unaffected by placentation. By defining a novel gating strategy, we report accumulation of myeloid cells in decB. We identified a decidua basalis-associated macrophage (decBAM) population with a differential transcriptome and secretome when compared to decidua parietalis-associated macrophages (decPAMs). decBAMs are CD11c^{hi} and efficient inducers of Tregs, proliferate *in situ* and secrete high levels of CXCL1, CXCL5, M-CSF, and IL-10. In contrast, decPAMs exert a dendritic cell-like, motile phenotype characterized by induced expression of HLA class II molecules, enhanced phagocytosis, and the ability to activate T cells. Strikingly, EVT-conditioned media are able to convert decPAMs into a decBAM phenotype. Cumulatively, these findings assign distinct macrophage phenotypes to decidual areas depending on placentation and further highlight a critical role for EVTs in the induction of pregnancy-tolerant macrophage polarization.

In this study we identified so far unrecognized, placenta-dictated immune responses at the maternal-fetal interface. Altogether we imply that placenta-derived trophoblasts induce a pregnancy-tolerant phenotype by suppressing antigen presenting cell-like functions in maternal tissue macrophages.

Introduction

During human pregnancy, fetal-derived placental extravillous trophoblasts (EVTs) invade the

decidualized mucosal uterine surface, referred to as decidua (1). This unique process, in

which semi-allogeneic EVTs intermingle and communicate with maternal decidual immune

cells, is fundamental for the maintenance and success of pregnancy. An imbalance in these

interactions can lead to the development of obstetrical syndromes such as preeclampsia or

uterine growth restriction (2). The human decidua has been the subject of various studies

directed towards understanding the function of uterine immune cell types. In order to enable

fetal tolerance, the maternal-fetal interface is dominated by a non-cytotoxic immune cell

response, which supports placental function (3, 4). A central role in the maintenance of this

tissue-specific, pregnancy-sustaining environment has been assigned to an interactive

network between EVTs and maternal immune cells. Remarkably, decidual natural killer

(dNK) cells and macrophages cooperate to transform the decidual vasculature into dilated

conduits able to deliver high amounts of low-pressure blood to the growing fetus (5). The

pivotal role of decidual immunology in pregnancy has further been underlined by

demonstrating a pregnancy-specific memory in dNK cells with the ability to support

reproductive success (6). Moreover, there are also indications for an active suppression of

immune responses at the maternal-fetal interface. In humans, EVTs have been

demonstrated to induce a non-cytotoxic phenotype in dNK cells by initiating intercellular

trafficking of the non-classical MHC-I class molecule HLA-G (7). In addition, studies in mice

suggest an active blockage of T cell infiltration at the maternal-fetal interface even after

forced reactivation of maternal memory T cells by placenta-specific overexpression of

ovalbumin (8). However, little is known about the specific function of decidual macrophages.

A recent paper identified various maternal macrophage subpopulations in the human

decidua, two of which constitute tissue resident cells, referred to as dM1 and dM2, and one is

found in the intervillous space adhering to placental villi, designated as dM3 (9). The dM3

type was recently characterized and identified as placenta-associated maternal

macrophages (PAMMs) (10). In this paper, the authors also unraveled distinctive phenotypes

of fetal-derived placental macrophages, referred to as Hofbauer cells (HB). Different to HBs and PAMMs in the intervillous space, decidual tissue-resident macrophages are not uniformly confronted with placental tissues. During early pregnancy, placentation takes place only at a rather distinctive uterine site, the decidua basalis (decB), whereas large areas of the decidua, the decidua parietalis (decP), are unaffected by placentation. While various morphological differences such as degree of vascularization (11, 12) or tissue stiffness (13) have been noticed, little is known about the difference between decB and decP tissues in terms of immune cell content and activation. In a recent publication, we were able to show low abundance of T cells in decB tissues when compared to decP samples. The drop in both CD4^{+} helper and CD8^{+} cytotoxic T cells was further associated with low abundance of T cell-recruiting high endothelial venules (12). These findings imply fundamental differences in immune cell distribution and extravasation into decB and decP. However, to date, there are no comparative data on immune cell distribution or function in decB and decP tissues that allow conclusions to be drawn about placentation-dependent effects on decidual immune cells.

In this study, we set out to select donor-matched first-trimester decB and decP tissue samples in order to identify immunological adaptation that specifically occur in response to placentation. By defining a novel flow cytometry gating strategy, we demonstrate that tissue-resident macrophages and neutrophils accumulate in decB tissues. We further identified a specific phenotype and functionality of decB-associated macrophages (decBAMs) in comparison to decP-associated macrophages (decPAMs). While decBAMs show a higher capacity to proliferate and induce Treg formation, decPAMs are more motile and phagocytic, and efficiently induce T cell proliferation.

Results

Myeloid cells specifically accumulate at the maternal-fetal interface

Figure 1.**Investigation of immune cell distributions in first-trimester decidual samples identifies myeloid cell accumulation in first-trimester decB tissues. (A)** Schematic drawing of a human pregnant uterus during the first trimester of pregnancy indicating decidua basalis (encircled by a red line, decB) and decidua parietalis (encircled by a blue line, decP). **(B)** Representative flow cytometry plots of decB and decP tissue cell isolates demonstrating distribution of CD45$^+$ immune cells and HLA-G$^+$ EVTs. The percentages of HLA-G$^+$ EVTs are indicated. **(C)** IF stainings of first-trimester decidual tissue sections showing HLA-G (magenta) and DAPI (blue) in the upper section and keratin 7 (KRT7; yellow), HLA-G (magenta) and DAPI (blue) in the lower tissue section. Representative images of n = 25 experiments. Scale bar, 100 μm. **(D)** Quantification of HLA-G$^+$ EVTs in first-trimester decB (n = 14) and decP (n = 7) cell isolates, analyzed by Student's t-test. The center line represents the mean. **(E)** TSNE plot showing distribution of major immune cell populations in decB and decP created from flow cytometry data of patient-matched tissue samples **(F)** Summary data (log2 fold change, n = 4) for the significant differences in secreted factors from patient-matched decB and decP tissue explants after 20 h in culture measured by the proximity extension assay (www.Olink.com). The schematic drawing shown on the top illustrates the experimental set-up. Data are represented as mean + SD (standard deviation). Significances were calculated using multiple t-tests. **, P ≤ 0.01. decGE, decidual glandular epithelium; EVT, extravillous trophoblast; Mo/Macro, monocytes, macrophages; Neutro, neutrophils; dNK cell, decidual natural killer cell.

In this study, we aimed at identifying placentation-specific immune modulation in the human decidua during early human pregnancy. To this end, we established a cohort of first-trimester decidual samples including areas affected by placentation (decidua basalis, decB) and donor-matched areas that do not interact with villous placental tissues (decidua parietalis, decP) (Fig. 1A). The presence of EVTs and abundance of glandular epithelium served as

markers to separate decB from decP (Fig. 1, B and C), respectively. An overview of our tissue sampling strategy is outlined in Fig. S1, A and B. Overall, we found that cell isolates from first-trimester decB tissues contain on average 22 % of HLA-G$^+$ EVTs compared with < 0.001 % (3.24*10^{-3}) of EVTs in decP tissues (Fig. 1 D) and that the total cellular density is significantly lower in decB when compared to matched decP samples (Fig. S1 C). Next, we defined the distribution of the major immune cell subtypes in decB and decP tissues, revealing an accumulation of myeloid CD45$^+$CD14$^+$ monocytes/macrophages and CD45$^+$CD66b$^+$ neutrophils in decB samples (Fig. 1 E).

With the exception of a few studies, decidual infiltration with neutrophils is a poorly described phenomenon. This is likely because most protocols used to determine decidual immune cell populations by flow cytometry include neutrophil-depleting density centrifugation. Well in line, comparative analyses of secreted factors from decB and decP tissue explants revealed an overrepresented myeloid-associated cytokine signature in decB tissues, including IL-10, CXCL1, CCL3, CCL4, CXCL5, and suppressors of T cell immunity (TRAIL and PD-L1). In contrast, decP samples showed elevated levels of factors involved in T cell, DC, and NK cell immunity such as IL-7, CXCL1, sCD5, sCD6, TRANCE or Flt3 (Fig. 1 F).

Formation of decB is associated with the accumulation of tissue-resident macrophages

To further increase the resolution of our data we applied specific markers to dissect macrophages from infiltrating blood monocytes. *In situ* dual immunofluorescence (IF) staining confirmed that all CD14$^+$ cells residing in the decidual stroma also express the pan macrophage marker CD68 and in addition are uniformly positive for CD163 and CD206 (Fig. S2 A). Subsequent flow cytometry analysis of decidual cell isolates revealed two CD14$^+$ populations, one lacking CD163 and CD206 expression and the other highly positive for both tissue macrophage markers (Fig. 2 A). While the latter CD163$^+$CD206$^+$ population showed a typical enlarged cell size and morphology with abundant vacuoles as well as high autofluorescence, as is commonly observed in macrophages (14), CD14$^+$CD163$^-$CD206$^-$ cells displayed a morphology typical for monocytes such as smaller cell size or little

granularity (Fig. 2, B and C). Bulk RNA-seq confirmed this notion by demonstrating that

$CD14^+CD163^+CD206^+$ cells express typical hallmark genes of tissue-resident macrophages

such as *MERTK*, *CD68*, *MAFB* or *FCGR2A* (15) and express comparatively low levels of

monocyte marker genes including L-selectin (*SELL*), *S100A12*, *S100A8*, and *S100A9* (Fig. 2

D and Fig. S2 C). Indeed, IF-analysis shows that $CD14^+S100A12^+$ monocytes are found in

the lumen of decidual vessels and not in the tissue stroma (Fig. S2 B).

Figure 2. **Isolation and characterization of tissue-resident decidual macrophages (A)** Flow cytometry gating strategy used to identify tissue-resident decidual macrophages by a $CD45^+CD14^+CD163^+CD206^+$ expression profile. Pink gate, $CD14^+CD163^+CD206^+$ macrophages. Orange gate, $CD14^+CD163^-CD206^-$ monocytes. **(B)** Macrophage (pink rectangle) and monocytic (orange rectangle) populations from decB and decP were sorted and stained by Giemsa staining. Representative images of *n* = 4 experiments. Scale bar, 20 μm. **(C)** Representative flow cytometry plots identifying autofluorescence (AF) in isolated $CD14^+CD163^+CD206^+$ (pink histogram) and $CD14^+CD163^-CD206^-$ (orange histogram) cell isolates from decB and decP. **(D)** MA plot of differentially expressed genes (DEGs) from RNA-seq. Pink and orange dots represent significantly up- or down-regulated DEGs in isolated $CD14^+CD163^+CD206^+$ (n = 8 pairs) and $CD14^+CD163^-CD206^-$ (n = 4 pairs) cells from decB and decP tissues. **(E)** Heatmap showing expression of macrophage (underlaid with pink)- and DC (underlaid with grey)-associated hallmark genes in isolated decBAM and decPAM. **(F)** Dotplot demonstrating distribution of $CD14^+CD163^+CD206^+$ decBAMs and decPAMs in patient-matched first-trimester decB and decP samples (n = 21 pairs). Patient-matched samples are indicated via connected dot plots. P-value was generated using paired t-test. **, P ≤ 0.01. decB, decidua basalis; decP, decidua parietalis; decBAM, decB-associated macrophage; decPAM, decP-associated macrophage.

Next, we analyzed whether our isolated decidual macrophage populations may express DC

core markers retrieved from various hallmark papers deciphering macrophage and DC

signature gene expression in human and mice (14, 16, 17). As expected, decidual

macrophages express conserved lineage markers such as *MERTK* and *MAFB* as well as

other typical markers for human and mouse macrophages, including *CD14*, *CD68*, *CEBPD*,

FCGR1A (CD64) or *FCGR2A* (CD32). In contrast, DC-associated lineage markers such as

CD1A/B/C, *CD226*, *FLT3* or *KIT* were absent from both populations (Fig. 2 E). By

considering our established markers for tissue-residency we were able to show a decB-

associated accumulation of tissue macrophages (Fig. 2 F). Moreover, comparative studies

with non-pregnant uterine samples associate the pregnancy-specific rise in dNK cells with

decP and highlights accumulation of myeloid cells as a placentation-dependent event at the

maternal-fetal interface (Fig. S2 D). Finally, we termed macrophages obtained from different

decidual compartments decBAMs and decPAMs, respectively.

These data show that placentation is associated with increased numbers of true tissue-

resident macrophages.

Accumulation of decidual tissue macrophages is associated with *in situ* proliferation

We next sought to determine the potential of decB to recruit neutrophils and macrophages.

Therefore, we generated conditioned media (CM) from cultivated patient-matched decB and

decP tissue samples and performed chemoattractant assays using isolated PBMCs or

neutrophils from peripheral blood samples. These assays revealed no differential effect

between decB- and decP-CM in the recruitment of CD14$^+$ blood-derived monocytes (Fig. 3 A)

or other PBMCs, including T cell subtypes, B cells or NK cells (Fig. 3 A, Fig. S3 A). In

contrast, separate assays showed that decB-CM exert a significantly higher potential to

attract blood neutrophils (Fig. 3 B). Well in line, culture media of decB tissues contained high

levels of well-described neutrophil chemoattractants including CXCL1, CXCL8, S100A8, and

S100A9 (18, 19) (Fig. 3 C). Strikingly, *in situ* IF staining showed significantly more

CD14$^+$Ki67$^+$ macrophages in decB tissues when compared with decP sections (Fig. 3 D).

Decidual tissue macrophages also expressed a wide array of cell cycle markers including

CCNA1, pRB, and CDK1 (Fig. 3 E). In addition, we observed the presence of mitotic figures

in tissue-resident CD14$^+$ decidual macrophages (Fig. 3 E). Finally, an *ex vivo* proliferation

assay determining EdU incorporation into cultivated decidual explants revealed that

decBAMs are capable of *de novo* DNA synthesis, again to a greater extent than decPAMs

(Fig. 3 F).

Figure 3. **decB-associated accumulation of myeloid cells is accomplished by chemoattractant factors and**
local proliferation of decBAMs (A) Migratory response of PBMCs (left diagram) and CD14$^+$ blood cells (right
diagram) to culture medium containing decB- or decP-CM (1:4, n = 8). Decidua culture medium was used as a
control. P-values were generated using Repeated-measures ANOVA with Tukey's multiple comparison test. **(B)**
Migratory response of blood neutrophils to culture medium without or with decB- and decP-CM (1:2, n = 4). Boxes
in box plots represent upper and lower quartiles. The center line represents the median. Whiskers show the
minimum and maximum of the data. P-values were generated using Repeated-measures ANOVA with Tukey's
multiple comparison test. **(C)** Secretory profile of cultivated (20 hours), patient-matched decB and decP explants
(n = 5 pairs) measured by bead-based multiplex immunoassays. Dots show measured levels in pg/ml. The center
line represents the mean. P-values were generated using paired t-tests. **(D)** Representative IF staining of a first-
trimester decB tissue section showing CD14 (magenta) and Ki67 co-staining (green). Quantification of four
patient-matched decB and decP tissue samples is shown to the right by a dot plot. Each dot represents the
percentage of Ki67$^+$CD14$^+$ double-positive cells for each tissue sample (n = 4 pairs). Scale bar, 20 μm. Patient-
matched samples are shown in connected dot plots. P-value was generated using a paired t-test. **(E)** IF co-
staining of first-trimester decB tissue sections showing cell cycle markers including CDK1, CCNA1, pRB in green
and CD14 in magenta. The two images to the right upper and lower panel demonstrate a Ki67 expressing mitotic
figure in a CD14$^+$ cell. DAPI (white) was used to visualize nuclei. Scale bars, 2 μm. **(F)** Representative IF staining
of a cultivated decB explant tissue demonstrating EdU (green) incorporation into CD14$^+$ (magenta) macrophages,
indicated by arrowheads. Inset picture shows a EdU+ macrophage at higher magnification. Quantification of EdU
incorporation into CD14$^+$ macrophages of cultivated decB and decP first-trimester tissue explants. Each dot
represents the percentage of CD14$^+$ EdU$^+$ cells for each tissue sample evaluated (n = 10 pairs). Patient-matched
samples are indicated via connected dot plots. Scale bar, 20 μm. P-value was generated using a paired t-test. *, P
≤ 0.05; **, P ≤ 0.01, n.s.: not significant. decB, decidua basalis; decP, decidua parietalis.

These results suggest that decB-specific accumulation of tissue macrophages is driven by *in*

situ proliferation and that, as expected, neutrophils are specifically recruited from blood.

decBAMs show a distinctive transcriptional and secretory phenotype

In-depth analysis of our bulk RNA-seq-based transcriptome data revealed substantial

differences between isolated patient-matched decBAMs and decPAMs, which are shown to

form two distinct groups by principal component analysis (PCA) (Fig. S4 A). We identified

1127 significantly differentially expressed genes (DEGs, adjusted p value < 0.05) between

decBAMs (512 up) and decPAMs (615 up) (Fig. 4 A). Immune-related DEGs included *ITGAX*

(CD11c), *CD44*, *CXCL2*, and *ANPEP* in decBAMs, and *AXL*, *GAS6*, *SELENOP*, *C3*, and

IL2RA in decPAMs (Fig. 4 A). IF- and flow cytometry-based analyses confirmed higher

expression of HMOX1, CD44, and CD11c protein in decBAMs (Fig. 4 B). Moreover,

functional gene enrichment analysis revealed that gene sets involved in

granulocyte/neutrophil activation and myeloid immune responses were overrepresented in

decBAM-associated DEGs (Fig. S4 B). Prior to our study, three tissue-resident myeloid cell

types have been identified by single-cell (sc) RNA-seq, designated as decidual macrophage

1 (dM1), decidual macrophage 2 (dM2) and dendritic cell 1 (DC1) (9). A third decidual

macrophage subtype (dM3) identified in this study, later defined as a subtype of placenta-

associated maternal macrophages (PAMMs), does not constitute a decidua-resident cell type

but is found in the intervillous blood space, adhering to placental villi (10). Our comparative

computational approach showed that transcripts upregulated in decPAMs clearly associated

with the dM2 phenotype whereas decBAMs showed a strong overlap with the previously

identified dM1-associated genes both in global and single gene expression pattern (Fig. 4 D).

Well in line, decBAM- or decPAM-associated DEGs identified by our bulk RNA-seq analysis

were also differentially regulated in dM1 and dM2 populations (Fig. 4 E). In addition,

decBAMs showed a closer similarity with dM3-specific signatures, compared to decPAM

(Fig. S4 C). To this end, we isolated PAMMs and confirmed their transcriptional overlap with

dM3 signatures but also with maternal blood-derived immune cells such as monocytes or

dendritic cells (DC2) (Fig. S 4 C). Overall, these data confirm that PAMMs originate from

different entities including blood monocytes and decidual macrophages (10). Next, we

digested decB and decP tissues in order to study the secretome of isolated and short-term

cultivated EVTs, neutrophils, decBAMs, and decPAMs (Fig. 4 F). All cells were sorted by

FACS except for EVTs, which were isolated via magnetic beads conjugated with anti-HLA-G.

Due to their large size, EVTs are very sensitive to the high pressure and shear forces in a

cell sorter and show improved viability when sorted over magnetic columns. Viability and

purity of EVTs were confirmed by flow cytometry after isolation (Fig. S4 D).

Figure 4. **First-trimester decBAMs and decPAMs differ in their transcriptional and secretory profile (A)** MA plot of DEGs from RNA-seq. Red and blue dots represent significantly up- or down-regulated DEGs in patient-matched isolated CD14^{+}CD163^{+}CD206^{+} decBAMs and decPAMs (n = 8 pairs). **(B)** Representative IF co-staining of a first-trimester paraffin-embedded decB and decP tissue section showing HMOX1 and CD44 expression (green) in CD14^{+} tissue macrophages (red). Arrowheads in yellow (left) or in green and red (right) indicate double positive cells. Scale bars, 20 μm. **(C)** Representative flow cytometric analysis of isolated decBAMs and decPAMs showing CD11c expression. **(D)** Violin plots showing expression of decBAMs (red) and decPAMs (blue) signatures in selected scRNA-seq clusters (Vento-Tormo et al., 2018). **(E)** Violin plots presenting expression of selected decBAM- and decPAM-associated gene transcripts in dM1 and dM2 scRNA-seq clusters (Vento-Tormo et al., 2018). **(F)** Secretory profile of magnetically sorted and cultivated (20 h) EVTs, decBAMs, decPAMS and neutrophils, determined by bead-based multiplex immunoassays (n = 5 pairs). Measured levels (pg/ml) of growth factors, chemokines and cytokines are shown as dots and the group mean is shown as centered line. The schematic drawing shown on the top illustrates the experimental set-up. P-values were generated using One-way ANOVA with Tukey's multiple comparison test. *, $P \leq 0.05$; **, $P \leq 0.01$; ***, $P \leq 0.001$. decB, decidua basalis; decP, decidua parietalis; decM, decidual macrophage; decBAM, decB-associated macrophage; decPAM, decP-associated macrophage; EVT, extravillous trophoblast; Neutro, neutrophil.

We determined secretion of cytokines and growth factors, which were selected based on our previous analyses and their involvement in myeloid or neutrophil immunity and function. In parallel, we measured these factors in decB and decP tissue explant CMs to control for a possible loss of tissue specificity upon single cell culture (Fig. S4 E). While decBAMs culture media contained significantly higher levels of CXCL1, CXCL5, GM-CSF, M-CSF, and IL-10,

decBAMs and decPAMs were equally efficient in releasing CXCL6, as well as high levels of

CXCL8. Among the macrophage-associated factors, the measured GM-CSF levels were the

lowest. All three immune cell populations secreted low but significantly induced levels of

VEGFA, when compared to EVTs. Our analyses further revealed that EVTs are efficient

producers of sPD-L1, TGFβ1, TGFβ2 and TRAIL. As a control for cell identity and

differentiation, we additionally analyzed EVT-specific sFlt-1 (20) (Fig. 4 F). Well in line, EVT-,

neutrophil-, and decBAM-associated factors were also significantly enriched in decB-CM with

the exception of M-CSF, GM-CSF and CXCL1, the latter showing elevated but not

significantly increased values (Fig. S4 E). Lastly, neutrophils secreted significantly higher

amounts of S100A8, S100A9, and MMP9 (Fig. S4 F).

In summary, decBAMs differ substantially from decPAMs by a specific transcriptome and

secretome.

311 decBAMs induce Tregs and are suppressed in their APC-like function

Our IF analyses show a strong difference in decBAM and decPAM appearance, the latter

exhibiting a more dendritic cell-like morphology (Fig. 5 A). Higher magnification clearly shows

an enhanced spindle-shaped morphology and formation of pseudopodia in decPAMs,

implying a more motile phenotype (Fig. 5 A). Interestingly, CD11c^{lo} decPAMs also showed a

more prominent staining with antibody against HLA class II molecules (Fig. 5 B). Well in line,

decPAMs transcripts are associated with significantly higher levels of *HLA-DOA*, *HLA-DPA1*

as well as *HLA-DRB1* and tended to show higher but not significantly elevated levels of *HLA-*

DRA (Fig. 5 C). To test whether decPAMs indeed show pronounced antigen presenting cell

(APC)-like functions we isolated decBAMs and decPAMs from the same donors and

performed functional *in vitro* assays. Comparative video-based analysis of freshly isolated

decidual macrophages indeed showed that decPAMs (Video 1) moved significantly faster

than decBAMs (Video 2) when tracked in real time (Fig. 5, D and E). In addition, decPAMs

also showed a significantly higher phagocytic activity when compared to decBAMs (Fig. 5, F

and G). A recent study suggests that decidual macrophages are efficient inducers of Treg

formation (21).

327
328
Figure 5. **decBAMs show a pregnancy-tolerating phenotype by suppressed APC-like function and**
enhanced ability to induce Treg formation. (A) Representative IF staining of decB and decP tissue sections
with antibodies against HLA-G (green) and CD14 (magenta). Zoomed insets on the right show appearance of
$CD14^+$ macrophages in areas invaded by HLA-G^+ EVTs (1, 2) and those unaffected by placentation (3, 4).
Representative images of n = 25 experiments. Scale bar, 20 μm. **(B)** IF co-stainings of first-trimester paraffin-
embedded decB and decP tissue sections showing CD11c (green, left panel), HLA-DRA (green, right panel) and
CD14 (magenta). White arrowheads indicate double positive cells. Representative images of n = 4 experiments.
Scale bar, 50 μm **(C)** Box plots show normalized transcript levels of ITGAX and HLA class II molecules in FACS-
sorted $CD14^+CD163^+CD206^+$ decBAMs and decPAMs analyzed by bulk RNA-seq (n = 8 pairs). Outliers are
shown as dots and defined as data points outside 1.5 times the interquartile range above the upper quartile and
below the lower quartile. P-values were calculated according to the recommended DESeq2 workflow. **(D)**
Representative cell tracks of isolated and short-term (24 h) cultivated decBAMs and decPAMs were generated by
live-cell microscopy (capture rate = 12 frames/h). Cell tracks were color-coded for each monitored cell over 12 h.
(E) Dots present average speed of captured individual cell tracks (n = 117) of decBAMs and decPAMs cultures (n
= 8 pairs). 7 outliers were removed by Grubbs' test. The center line represents the mean. P-value was generated
using Student's t-test. **(F)** Representative flow cytometric analysis of phagocytosed FITC-labeled beads by
decBAMs and decPAMs after 2 h of incubation. **(G)** Dots represent the percentage of phagocytosed FITC-labeled
beads of each individual experiment performed (n = 15 pairs). Patient-matched samples are indicated via
connected dot plots. P-value was generated using a paired t-test. **(H)** Box plots show the potential of decBAMs
and decPAMs to induce $CD4^+FOXP3^+CD25^+$ Tregs from isolated $CD3^+$ blood T cells (n = 5). P-value was
generated using paired t-test. **(I)** Representative flow cytometry plots showing CFSE dilution in $CD4^+$ and $CD8^+$
isolated blood T cells stimulated with anti-CD3/CD28 in the presence of decBAMs (red histogram) or decPAMs
(blue histogram). **(J)** Box plots represent the median level of the percentage of dividing $CD4^+$ and $CD8^+$ T cells (at
least one cell division as defined by CSFE dilution) in the absence or presence of decBAMs and decPAMs (n = 8).
Box plots represent median values ± SEM. Boxes in box plots represent upper and lower quartiles. The center
line represents the median. Whiskers show the minimum and maximum of the data. DAPI was used to visualize
nuclei. P-values were generated using one-way ANOVA with Tukey's multiple comparison test. *, P ≤ 0.05; **, P ≤
0.01; ***, P ≤ 0.001. decB, decidua basalis; decP, decidua parietalis; decBAM, decB-associated macrophages;
decPAM, decP-associated macrophages; Tregs, regulatory T cells.

358
By studying this phenomenon, we found that induction of $CD4^+CD25^+FOXP3^+$ Tregs is not a

uniform feature of decidual macrophages since Treg induction was in particular executed by

decBAMs (Fig. 5 H). To further test for dendritic cell-like function, we studied the potential of

decidual macrophages to activate blood-derived T cells. To this end, we cultivated T cells

from healthy donors with decBAMs or decPAMs in a ratio of 10:1. In line with our previous

results, mainly decPAMs are able to trigger proliferation in both CD4$^+$ helper T cells and

CD8$^+$ cytotoxic T cells (Fig. 5, I and J).

Altogether, we show that decBAM are impaired in their ability to migrate, phagocytose, and

promote T cell proliferation but are efficient inducers of Tregs.

The secretome of EVTs induces a decBAM-like phenotype

Since our secretome screen of isolated EVTs revealed high secretion of immunomodulatory

factors (Fig. 4 F) we assumed that EVTs can alter decidual macrophage activation and

function. In order to avoid preconditioning by a decB environment likely under the control of

EVTs, we decided to test this by studying EVT-dependent effects on either whole decP

tissue explants or isolated decPAMs. To this end, we treated isolated decP tissue explants

with EVT-conditioned media (EVT-CM) and investigated possible alterations in decPAMs

upon treatment (Fig. 6 A). Immunofluorescence-based analysis indeed showed that addition

of EVT-CM significantly increases CD44 expression of decPAMs *in situ* to a comparable

level as detected in decB tissue explants (Fig. 6 B). Next, we exposed isolated decPAMs to

50% EVT-CM and found a significantly reduced motility and phagocytic activity (Fig. 6, C and

D). EVTs secrete high levels of the immunomodulatory factors TGFβ1 and TGFβ2, well

studied for their pleiotropic effects on macrophages, as well as high levels of PD-L1, which

has recently been suggested to inhibit macrophage phagocytosis when expressed by tumor

cells (22). However, the suppressive activity of EVT-CM towards the phagocytic activity of

decPAMs was not reversed by the addition of any of the blocking antibodies against TGFβ or

PD-L1 (Fig. 6 E). Next, we investigated the effect of EVT-CM on the ability of decPAMs to

interfere with T cell immunity. While neither EVT-CM alone nor in combination with decPAMs

affected Treg differentiation (Fig. S5 A), we found a significantly reduced decPAM-dependent

activation of CD4$^+$ and CD8$^+$ T cells upon treatment with EVT-CM (Fig. 6, F and G).

Figure 6. **decPAMs are functionally reprogrammed by the secretome of EVTs (A)** Schematic drawing to illustrate the experimental set up. EVTs were isolated by magnetic beads conjugated with anti-HLA-G and cultivated for 20 h to generate EVT-CM (a) used to stimulate decP tissue explants (b) or FACS-isolated decPAMs (c). **(B)** Representative double IF stainings using antibodies against CD14 (magenta) and CD44 (green) investigating overlapping CD14 CD44 expression in unstimulated decB and decP tissue cultures and EVT-CM stimulated decP explant cultures. Examples of overlapping signals are marked by white arrow heads. Box plots indicate median value of white pixels per μm^2 (generated by overlays of green and magenta colored CD14/CD44 co-stainings). P-values were generated using one-way ANOVA with Tukey's multiple comparison test. Scale bars, 20 µm **(C)** Diagram shows average speed of each cell tracked (n = 90) in independent experiments using isolated decPAMs either without or with stimulation with 50% EVT-CM (n = 6 pairs). 7 outliers were removed by Grubbs' test. The center line represents the mean. P-values was generated using a paired t-test. **(D)** Dot plot represents the percentage of phagocytosed FITC-labeled beads of each individual experiment performed (n = 14 pairs). Patient-matched samples are indicated via connected dot plots. P-value was generated using a paired t-test. **(E)** Phagocytosis assays were performed in the presence of EVT-CM alone, with isotype control or blocking antibodies for TGFβ or PD-L1. **(F)** Box plots show the percentage of proliferative CD4$^+$ or CD8$^+$ T cells stimulated with anti-CD3/CD28 in the absence or presence of decPAMs and/or EVT-CM (n = 7). P-values were generated using one-way ANOVA with Tukey's multiple comparison test. **(G)** Potential of short-term (20 h) cultivated decPAMs to secrete IL-10 (pg/ml) stimulated without or with EVT-CM (n = 15 pairs). **(H)** Box plots represent the percentage of dividing CD4$^+$ and CD8$^+$ T cells (at least one cell division as defined by CSFE dilution) stimulated with decPAMs and EVT-CM in the absence or presence of isotype control or a blocking antibody for TGFβ (n = 3). P-values were generated using one-way ANOVA with Tukey's multiple comparison test. **(I)** Percentage of EdU$^+$ nuclei in CD14$^+$ macrophages of cultivated decP first-trimester tissue explants. Each dot represents the percentage for each tissue sample evaluated (n = 6 pairs). Patient-matched samples are indicated via connected dot plots. P-values were generated using Repeated-measures ANOVA with Tukey's multiple comparison test. Boxes in box plots represent upper and lower quartiles. The center line represents the median. Whiskers show the minimum and maximum of the data. *, P ≤ 0.05; **, P ≤ 0.01; ***, P ≤ 0.001, n.s.: not significant. decB, decidua basalis; decP, decidua parietalis; decBAM, decB-associated macrophages; decPAM, decP-associated macrophages; EVT-CM, extravillous trophoblast-conditioned medium.

Given that EVT-CM alone did not suppress CD4$^+$ or CD8$^+$ T cell proliferation (Fig. 6 F and G)

we assumed an indirect effect for instance by EVT-CM-driven induction of IL-10, as

previously shown for cancer-derived PD-L1 (22) or by other TGFβ-driven effects on

decPAMs. However, EVT-CM neither altered IL-10 secretion by cultivated decPAMs nor did

TGFβ blockage alter the suppressive effect of EVT-CM on decPAM-induced T cell

proliferation (Fig. 6, G and H). Lastly, we incubated decP explant tissues with EVT-CM and

found significantly induced EdU incorporation into macrophages when compared to control

treatment. In this setting, the addition of a neutralizing antibody against TGFβ reversed the

growth-promoting effect of EVT-CM (Fig. 6 I).

In summary, these data show that EVTs have the capacity to trigger a pregnancy-tolerant

phenotype in macrophages via their pleiotropically acting secreted factors.

Discussion

In this study, we describe profound phenotypical and functional differences of tissue-resident

In this study, we describe profound phenotypical and functional differences of tissue-resident

macrophages in dependence on their localization within the human decidua. We established

a donor-matched cohort including well-characterized decB and decP tissue samples and

developed a flow cytometry panel to dissect tissue-resident macrophages from monocytes.

Interestingly, a computational comparison of our bulk RNA-seq analysis with published

scRNA-seq data revealed that the transcriptomes of decBAMs and decPAMs have significant

overlaps to the recently identified dM1 and dM2 subtypes, respectively. The substantial

difference between decBAMs and decPAMs in terms of transcripts, cellular proteome, and

secretome also translated into different functional phenotypes. While decBAMs are likely

replenished by local proliferation, induce Treg formation, and secrete important pregnancy-

sustaining factors such as IL-10, decPAMs exhibit a more motile phenotype with higher

efficiency to phagocytose and to trigger T cell proliferation. Finally, we show that EVT-CM re-

programs decPAMs into a functional phenotype, reminiscent of decBAMs.

During the first trimester of pregnancy, blastocyst implantation and subsequent formation of

the embryo and placenta do not affect the entire decidua. We therefore hypothesized that

maternal immunological adaptation in the decidua is differentially regulated depending on the

site of placentation. Indeed, our flow cytometry approach revealed significant differences by

identifying a decB-associated increase in neutrophil and macrophage accumulation. In

addition, we refined the previously reported pregnancy-dependent increase in dNK cells by

showing that this phenomenon is particularly pronounced in decP rather than the maternal-

fetal interface. While decB constitutes the actual maternal-fetal interface, decP areas make

up by far the largest part of the pregnant uterus in the first trimester. It may therefore easily

be possible that previous studies on dNK cell distribution in the first trimester of pregnancy

were compromised by decP tissue contamination.

Due to the lack of suitable cell surface markers, we sought to establish a gating strategy

allowing us to distinguish true tissue macrophages from other blood or tissue-derived

myeloid cell types including monocytes and DCs. This issue was particularly relevant for our

study as known markers to distinguish human APC-like myeloid populations in understudied

tissues such as the decidua are scarce. Owing to the high vascularization of the decidua,

distribution of specific immune cells within enzymatic decidua tissue digests is often

compared with those in peripheral blood in order to assess local accumulation of cells. This

approach, however, bears relevant caveats. Firstly, this method does not take into account

that immune cell distributions differ between peripheral blood and tissue capillaries. For

instance, it has been shown that intravascular T cells accumulate in the lumen of decidual

vessels by adhering to vessels but do not infiltrate the tissue (8). Secondly, so-called non-

classical monocytes have been described to accumulate at specific sites adhering to the

vascular wall (23) and, under specific conditions, are also able to infiltrate the tissue without

differentiating into macrophages (24, 25). Therefore, we established a novel gating strategy,

allowing us to specifically distinguish tissue macrophages from blood- or vessel-associated

monocytes. Indeed, CD14$^+$CD163$^-$CD206$^-$ cells clearly differ from decidual tissue-resident

macrophages and show upregulation of typical blood monocyte markers including the

prototypical blood-associated immune cell marker L-selectin (*SELL*). Further immunotyping

of CD14$^+$CD163$^+$CD206$^+$ decidual macrophages revealed high expression of lineage-

associated hallmark genes such as *MERTK* or *MAFB* and induction of other typical markers

for human and mouse macrophages, including *CD14*, *CD68*, *CEBPD*, *FCGR1A* (CD64) or

FCGR2A (CD32) (15). In addition, we find that these cells show typical macrophage

morphology, high autofluorescence and side scatter as well as absence of typical DC-

associated lineage markers such as *CD1A/B/C*, *CD226*, *FLT3* or *KIT* (14, 16, 17). These

data indicate that CD14$^+$CD163$^+$CD206$^+$ cells represent true tissue-resident decidual

macrophages.

We identified over 500 DEGs to be overexpressed in decBAMs when compared to decPAMs,

and subsequent enrichment analysis indicated them to be associated with neutrophil and

myeloid cell activation. Well in line, isolated and short-term cultivated decBAMs actively

secrete high levels of CXCL1, CXCL5, CXCL8, IL-10, and M-CSF. The latter two in

particular, have been shown to exert crucial functions during pregnancy for instance by

inducing a decidual-like phenotype in monocyte-derived macrophages (26-28) thereby acting

in an autocrine self-perpetuating manner. Furthermore, reduced IL-10 blood levels are

associated with human pregnancy disorders such as preeclampsia (29) and while

administration of IL-10 prevents naturally occurring fetal losses (30), its deletion can provoke

spontaneous abortions in mice (31). M-CSF has been shown to support placental function by

affecting EVT invasion (32). In addition, we find that decBAMs overexpress specific cell

surface markers including CD11c allowing for flow cytometry-based separation of decBAMs

and decPAMs in non-characterized decidual tissues. Indeed, CD11c has previously been

suggested to distinguish different decidual macrophage populations (27, 33), however not in

the context of differences between decB and decP areas. Along these lines, our comparative

computational approach demonstrated that our decBAM and decPAM populations share

major similarities with dM1 and dM2 populations identified by scRNA-seq (9), respectively.

This implies that the previously suggested macrophage heterogeneity at the maternal-fetal

interface is likely a consequence of not considering decP contamination, which we excluded

by a thorough patient-matched tissue sampling strategy.

Further comparative studies revealed a significant difference in the expression of HLA class

II molecules in CD14$^+$ tissue macrophages of decB and decP tissue samples. This

observation correlated with a higher transcript level of specific HLA class II molecules in

decPAMs. Functional assays revealed that decPAMs are efficient phagocytes, stimulate T

cell proliferation and show a migratory phenotype. These data imply that decPAMs constitute

the major tissue-resident APC population, where they serve as patrolling cells to protect the

maternal-fetal interface from invading pathogens. However, migratory APCs are central in

priming T cell responses to peripheral tissue antigens (34, 35) and thus pose a critical threat

to human pregnancy by potentially triggering T cell responses to placental antigens. Indeed,

decBAMs are significantly impaired in their migratory and phagocytic activity as well as in

their potential to trigger T cell proliferation. In line with this, decBAMs induced higher

numbers of CD4$^+$CD25$^+$FOXP3$^+$ Tregs. This phenomenon is well-described for IL10- and

TGFβ-secreting anti-inflammatory macrophages (36) and has also been assigned to decidual

macrophages (21), however not in comparison to decPAMs. Accumulatively, our descriptive

and functional data imply that decBAMs trigger a broad anti-inflammatory environment

towards T cell activation and are likely one of the main inducers of neutrophil influx. Indeed,

neutrophils are specifically attracted by decB-CM, which was shown to be rich in decBAM-

secreted neutrophil chemoattractants including CXCL1, CXCL8, and CXCL5. So-called

myeloid-derived suppressor cells (MDSCs), shown to inhibit CD8^{+} T cell function accumulate

in the blood of pregnant women (37) and were also reported to accumulate in the decidua

(38). Well in line, we find that decB-derived neutrophils secrete high levels of MMP-9 and the

neutrophil-associated chemokines S100A8 and S100A9. While the latter two have recently

been suggested to serve as markers for MDSCs (39), MMP-9 production is also a feature of

tumor-associated neutrophils and was found to trigger tissue remodeling and angiogenesis in

this context (40, 41).

Maintenance of tissue macrophages can be regulated via two different routes. Originally,

macrophages are described to differentiate from infiltrating bone marrow-derived circulating

monocytes (42). Pioneering work in mice however, showed that macrophages are also

replenished by locally proliferating, so-called tissue resident macrophages (43). In mice, self-

renewing yolk sac-derived macrophages are seeded into tissues during development where

they expand during embryonic development and reside throughout adult life (43, 44). While

local renewal of human tissue macrophages, independent of blood monocyte influx, has

been confirmed in various transplantation studies in the liver (45), brain (46), lung (47, 48)

and heart (49), a definitive proof for the existence of long-lived yolk sac-derived, tissue-

resident macrophages in humans is missing. In our study we find that decBAMs show signs

for DNA synthesis in an *ex vivo* assay and a higher proliferative capacity *in situ*, compared to

decPAMs. Although we cannot exclude macrophage replenishment by monocyte

extravasation, additional *ex vivo* assays suggest that decB-CMs do not exert higher potential

to attract monocytes when compared to decP explant-CMs. Macrophage proliferation at the

maternal fetal interface has further been confirmed in Hofbauer cells, which likely replenish

independently of the embryonic bone marrow as they locally proliferate and share

transcriptional overlap with human yolk sac macrophages but not embryonic monocytes (10).

However, tissue resident macrophage biology is greatly dependent on extrinsic stimuli

suggesting that the local environment determines the mature functionality of macrophages

(43). For instance, macrophage progenitors, regardless of ontogeny, equally develop into

fully functional alveolar macrophages (50) and peritoneal macrophage diversity was shown

to be determined by tissue-derived signals rather than intrinsic factors (51). We therefore

tested whether the specific decBAM phenotype is controlled by extrinsic factors such as

placenta-derived signals.

To test this hypothesis, we incubated isolated decPAMs with CM of cultivated primary EVTs

in order to mimic trophoblast-dependent effects on decidual macrophages, unaffected by

placentation *in utero*. Functional studies on viable tissue explants revealed that indeed

placenta-derived signals can override the tissue-specific phenotype of decPAMs. In this

setting, the addition of EVT-CM led to a significant induction of proliferation and upregulation

of CD44 expression, a marker of decBAMs. Paralleling the phenomenon observed in decP

tissue explants, EVT-CM also changed the functionality of isolated decPAMs by suppressing

their migratory and phagocytic activity. Similar observations have been made in cancer

where tumor cells selectively inhibit phagocytosis of tumor-associated macrophages (TAMs)

supposedly to avoid generation of tumor antigen-specific cytotoxic T cells (52). Indeed,

restoration of the phagocytic activity in TAMs led to cancer-specific priming of CD8^{+} T cells

(53). Similar to the reduced ability of decBAMs to trigger T cell proliferation, decPAM-

mediated T cell activation was also significantly suppressed upon addition of EVT-CM. These

data show that EVT-derived factors indeed play a central role in the extrinsic control of

macrophage function. Neutralizing antibodies targeting TGFβ, PD-L1 or IL-10 had no effect

on the EVT-CM dependent effects on decPAM. This is likely due to the pleiotropic effect of

EVT-CM on decidual macrophages also noticed by another study reporting that the FOXP3^{+}

Treg-inducing effect of EVTs was unaffected by the addition of neutralizing antibodies

targeting CD3, HLA-C, HLA-G, ILT2, TGFβ and PD-L1 (21). However, selective blockage of

TGFβ reversed the growth-promoting effect of EVT-CM in decPAMs. This observation

together with our finding that isolated decBAMs secrete high levels of M-CSF implies a

growth-inducing autocrine loop as well as extrinsic proliferative stimuli by invasive EVTs.

Indeed, TGFβ1 has been shown to enhance macrophage proliferation via the induction of M-

CSF (54).

The generation of an immunosuppressive environment is decisive for a successful

pregnancy. However, our data impose that this phenomenon does not affect the entire

decidua. In fact, we find that macrophages further away from the placentation site, referred to

as decPAM in this study, show functionality of tissue-patrolling macrophages. In contrast,

decBAMs residing at the maternal-fetal interface exhibit significantly less pronounced APC-

like function. Our study further implies that this pregnancy tolerant phenotype is dictated by

the placenta as EVTs can be used to re-program decPAMs towards a state reminiscent of

decBAMs.

Material and Methods

Ethical considerations

All experiments and analyses were conducted in accordance with the Declaration of Helsinki

as well as Austrian laws and guidelines. First trimester (6 – 10 weeks of gestation, n = 97)

decidual and placental tissues were derived from women undergoing elective termination of

pregnancy for nonmedical reasons. The use of patient material was approved by the Ethics

Committee of the Medical University of Vienna. Ethical approvals are annually renewed. The

use of blood samples from healthy control women for migration assays of PBMCs was

approved by the Regional Ethics Committee in Linköping, Sweden. Written informed consent

was obtained from all subjects.

596
Cell isolation

For decidual and endometrial immune cell isolation, tissue was cut into small pieces using a

scalpel and digested using 2,5 µg/ml Collagenase IV (Worthington) and 25 mg/ml DNase I

(Sigma-Aldrich) with the 37°C Multi-B program of a gentleMACS Dissociator (Miltenyi

Biotec). The resulting single cell suspension was passed through a 70 µm cell strainer

(Falcon). If necessary, red blood cells were lysed by incubating cells in a buffer containing

155 mM NH4Cl, 10 mM KHCO3, and 0.1 mM EDTA (pH 7.3) for 5 min, before staining for

flow cytometry or sorting.

For flow cytometry and sorting, macrophages were defined as $CD45^+CD14^+CD163^+CD206^+$,

monocytes were defined as $CD45^+CD14^+CD163^-CD206^-$, and neutrophils were defined as

CD45+CD66b+. Dead cells were excluded using the viability dye Zombie Violet (BioLegend).

For generation of conditioned media, sorted cells were seeded onto Nunc Cell-Culture plates

(ThermoFisher) at a density of 1 million cells/ml in Decidua culture medium, consisting of

DMEM/F-12 without phenol red (Gibco), supplemented with 10% FBS superior (Sigma

Aldrich), 50 µg/ml gentamicin (Gibco) and ITS+ Premix (Corning), and cultured for 20 hours

at 37°C. Cell culture supernatants were then centrifuged at 12000 g for 10 minutes at 4°C,

snap frozen in liquid nitrogen, and stored at -80°C until further use.

PAMMs were isolated according to a published protocol (10), with some adjustments. Briefly,

villi were scraped with a scalpel and digested with 0.2% Trypsin (Invitrogen) and 12.5 mg/ml

DNase I (Sigma-Aldrich) in HBSS-Mg/Ca-free medium (Sigma-Aldrich) at 37°C for 7 min.

The resulting single cell suspension was passed through a 70 μm cell strainer (Falcon). If

necessary, red blood cells were lysed by incubating cells in a buffer containing 155 mM

NH4Cl, 10 mM KHCO3, and 0.1 mM EDTA (pH 7.3) for 5 min, before staining for FACS

sorting. PAMMs were defined as CD45+HLA-DR+ cells.

Primary EVTs were isolated according to a previously published protocol (55). Briefly, villi

were scraped with a scalpel and digested in two sequential digestion steps using 0.125%

trypsin (Invitrogen) and 12.5 mg/ml DNase I (Sigma-Aldrich) in HBSS-Mg/Ca-free medium

(Sigma-Aldrich). Each digest was performed at 37°C for 30 min without agitation.

Subsequently, cells were filtered through a 100 μm cell strainer (Falcon). The cells were then

layered on top of a Percoll gradient (10–70%; Pharmacia, Uppsala, Sweden) and centrifuged

at 1,175 g at 4°C for 24 min without braking at the end of the run. Cells between 35% and

50% of the Percoll layer were collected. If necessary, red blood cells were lysed by

incubating cells in a buffer containing 155 mM NH4Cl, 10 mM KHCO3, and 0.1 mM EDTA

(pH 7.3) for 5 min.

Remaining cells were then magnetically labeled with HLA-G – PE antibody and anti-PE

microbeads and enriched for HLA-G+ EVTs by magnetic-activated cell sorting using an

OctoMACS separator and MS columns (Miltenyi Biotec).

HLA-G+ EVTs were seeded on fibronectin-coated tissue culture plates (Nunc Cell-Culture

Plates, ThermoFisher) at a density of 1 million cells/ml EVT culture medium, consisting of

DMEM/F-12, GlutaMAX (Gibco), supplemented with 10% FBS Superior (Sigma Aldrich), 50

μg/ml gentamicin (Gibco), and 0.5 μg/mL fungizone (Gibco), and left to differentiate for 1-3

days before collecting cell culture supernatants. The conditioned media were centrifuged at

12000 g for 10 minutes at 4°C, snap frozen in liquid nitrogen, and stored at -80°C until further

use.

641
642

Cell density

To determine the density of cells within decidual tissues, the tissue was weighed before

digestion and the weight was correlated with the cellular output after digestion, determined

by a CASY TT cell counter.

Flow cytometry

For analysis of immune cell distributions within decidual and endometrial tissues, cells were

isolated as described above and stained for flow cytometry using the antibodies listed in

Table S1. Immune cells were defined as CD45$^+$. Within the immune cell gate, neutrophils

were defined as CD66b$^+$, macrophages/monocytes were defined as CD66b$^-$CD14$^+$, dNK/uNK

cells were defined as CD3$^-$CD56^{hi}, T cells were defined as CD3$^+$, and B cells were defined as

CD19$^+$. All defined immune cell types were mutually exclusive.

To create the TSNE plot in Fig. 1 we used the CyTOF workflow as published by Nowicka et

al. (56) and modified it accordingly for flow cytometry data.

Immunofluorescence of decidual tissue sections

First trimester decidual tissues were fixed in 7.5% formaldehyde and embedded in paraffin

(Merck). Sections (2.5 μm) were cut using a microtome (HM355; Microm) and deparaffinized

by incubating for 10 minutes in Xylene, followed by 100%, 96%, and 70% ethanol, and

deionized water. Antigens were retrieved using citrate buffer (pH 6.0, Sigma-Aldrich) in a

KOS MicrowaveStation (Milestone SRL).

For staining, sections were blocked for 1 hour in TBS/T containing 5% normal goat serum

(Cell Signaling Technology) and then incubated with primary antibodies listed in Table S1

overnight at 4°C. Subsequently, the slides were washed in TBS/T 3 times and then incubated

with secondary antibodies (2 μg/ml) and DAPI (1 μg/ml, Roche) for 1 hour at room

temperature.

Images were acquired on a fluorescence microscope (Olympus BX50) using a Hamamatsu

ORCA-sparc digital camera and the Olympus cellSens Standard software.

Explant culture

Explants were generated by cutting decB and decP tissue into small pieces of approximately 1x1 cm. Explants were weighed and put into 4 ml of Decidua culture medium per 1 gram of tissue, then cultured overnight at 37°C. Conditioned media were centrifuged at 12000 g for 10 minutes at 4°C, snap frozen in liquid nitrogen and stored at -80°C until further use.

To assess the effect of EVT-CM on macrophages *in situ*, explants were cultured in 50% EVT-CM overnight, then fixed in 7.5% formaldehyde and processed for immunofluorescence as described above. For proliferation assays, 10 µM EdU (EdU-Click 488 kit, baseclick) was added to the explant culture and the EdU detection protocol was performed according to manufacturer's user manual before blocking. Sections were co-stained with CD14, and macrophage EdU incorporation was assessed using the ImageJ software.

For blockage experiments, 1 µg/ml anti-human TGF-β antibody was added to the culture.

Analysis of conditioned media

Conditioned media from decB and decP explants were analyzed by the proximity extension assay on the Olink proteomics platform (www.olink.com), using the Inflammation Panel. Samples were sent to and analyzed by the Clinical Biomarker Facility Unit at SciLifeLab in Uppsala, Sweden.

Conditioned media from decB and decP explants, as well as decBAMMs, decPAMMs, EVTs, and decB neutrophils, were analyzed using the magnetic bead-based immunoassays by Bio-Techne (Luminex Performance Assay TGF-β Premixed Kit and Luminex Discovery Assay with personalized panels). The samples were processed according to manufacturer's user manual and measured on a Luminex 200 machine.

RNA sequencing

After isolation of macrophages or monocytes (as described above), RNA was extracted using the SPLIT RNA Extraction Kit (Lexogen) and sent to Lexogen in Vienna for library preparation and sequencing (QuantSeq). Fastq files were aligned to the human reference

genome GRCh38 with Gencode annotation using STAR aligner in 2-pass mode (57). The count matrices were calculated with STAR/htseq-count. Differential gene expression was calculated using DESeq2 (58) , applying batch modelling where required. Genes with counts lower than 100 in 90% of samples were filtered out. LFC shrinkage with approximate posterior estimation for GLM coefficients was applied for downstream visualization (59) . For the PCA visualization, batch effects were removed with limma (60). We calculated Gene Ontology enrichment scores with the webtool g:Profiler and plotted the data in R (61-63).

scRNA-seq data were downloaded from EMBL-EBI using the accession number E-MTAB-6701. Raw sequencing data were aligned to the reference genome GRCh38 using 10x Genomics Cell Ranger 6.1.2. Output files were analyzed and filtered with the R package Seurat 4.0.6 (64-67). All cells with low overall gene expression or which showed high mitochondrial gene expression were filtered out. The data were log-normalized before entering the Seurat integration workflow. Cluster annotation was performed applying the list of cluster-specific genes published along with the original publication (9). Violin plots were created with the Seurat VlnplOt function, using either single gene expression or module scores, calculated with the Seurat AddModuleScore function (64-67).

PBMC migration assay

Blood from healthy, non-pregnant female donors was collected in Na-heparin tubes and PBMCs were isolated using Lymphoprep (Axis Shield) according to manufacturer's instruction. Conditioned media of decB and decP explants were pipetted into wells of a 24-well plate (Corning) at a concentration of 25% CM in Transwell medium consisting of Roswell Park Memorial Institute (RPMI) 1640 medium supplemented with 1 mg/ml human serum albumin (Octapharma), and 100 units/ml penicillin, 100 µg/ml streptomycin and 29.2 mg/ml L-glutamine (Gibco). Transwell inserts (6.5 mm inserts with 5.0 µm pores, Corning) were coated with 1.43 mg/ml Matrigel (Growth factor-reduced, Corning) for 1 hour at room temperature. Then, the inserts were placed into the wells containing the CM and the plate was pre-incubated for 1 hour at 37°C. PBMCs were seeded into the top part of the transwell

insert (0.5 million cells in 100 µl Transwell medium) and the plate was incubated at 37°C for

4 hours. Migrated cells were collected by taking up the medium from the bottom part of the

transwell and scraping any adherent cells off the bottom of the plate. Cells were then stained

for flow cytometry and analyzed using a FACSCanto II flow cytometer (BD). TruCount tubes

(BD) were used to determine the absolute numbers of migrated cells.

Neutrophil migration assay

Neutrophil migration towards decB and decP supernatants was measured using 96-well

trans well plates (Corning, 5 µm polycarbonate membranes). Filters were pre-soaked in

buffer (PBS with Ca2+/Mg2+ supplemented with 0.1% BSA, 10 mM HEPES, and 10 mM

glucose) for 1 hr at 37°C. Polymorphonuclear leukocytes (PMNLs) were isolated from

healthy, non-pregnant donors as previously described (68). Bottom wells were loaded with

100 µl supernatants (1:2 dilution with media) and upper wells with 100 µl PMNL (4x106

cell/ml). Cells were allowed to migrate for 1hr at 37°C and subsequently fixed with 150 µl of

fixation solution (CellFIX, BD). Number of migrated neutrophils was measured at a BD

FACSCanto II for 30 sec and separated from eosinophils based on their different auto-

fluorescence in the V450 channel.

Cell Tracking

For in vitro analysis of cell motility, macrophages were seeded at a density of 250.000

cells/ml Decidua culture medium and incubated in a Lionheart FX automated live cell imager

at 37°C and 5% CO2. Time-lapse videos were created by taking a picture every 5 minutes

for 24 hours, using the Gen5 3.08 software. All images between 12 and 24 hours of culture

were used to track cells and analyze their speed with the CellTracker tool in MATLAB

(http://celltracker.website). Cell starting coordinates were set to 0,0 and subsequent data

points were newly calculated accordingly for visualization purposes. Cell tracks were

visualized in R.

Phagocytosis Assay

Decidual cells were isolated as described above and incubated in the presence of

fluorescence-labeled latex beads (50 beads per cell; latex beads, 1 µm, carboxylate-modified

polystyrene, fluorescent yellow-green, Merck) for 2 hours at 37°C. A negative control was

incubated for 2 hours at 4°C to control for non-specific adhesion of beads to the cell surface.

Then, cells were detached from the plate using Accutase (Gibco StemPro Accutase, Fisher

Scientific) and stained for flow cytometry. Phagocytosis was assessed on a FACSVerse flow

cytometer using the BD FACSuite software, by measuring the signal of the beads within the

macrophage gate (using the negative control as a gate-setting control).

To measure the effect of EVT-CM on macrophage phagocytosis, the cells were cultured in

50% EVT-CM. For blockage experiments, 1 µg/ml anti-human TGF-β or 20 µg/ml anti-human

PD-L1 antibody was added to the culture.

T cell assays

T cells were isolated from PBMC of healthy, non-pregnant female volunteers using the Pan T

Cell Isolation Kit (Miltenyi,130-096-535). To monitor proliferation, T cells were labeled with 5

µM carboxyfluorescein diacetate succinimidyl (CFSE Cell Division Tracker Kit, Biolegend).

For Treg induction and T cell activation, flat-bottomed 96-well plates (Nunc Cell-Culture

Plates, ThermoFisher) were coated with 1 µg/ml anti-CD3 and 2 µg/ml anti-CD28 antibodies

(BioLegend) for 2 hours and seeded with 50.000 T cells/well. To measure the effect of

macrophages and EVT-CM on T cell proliferation and Treg induction, 5.000 macrophages

and/or 50% EVT-CM were added to the culture. For the blockage experiments, 1 µg/ml anti-

human TGF-β antibody was added to the co-culture. After three days, T cell proliferation was

determined by CFSE dilution and Treg differentiation was determined by surface staining of

CD25 and intracellular staining of FOXP3 using the eBioscience Foxp3/Transcription Factor

staining buffer set (Invitrogen). Data were collected using a FACSVerse flow cytometer using

the BD FACSuite software and were analyzed with FlowJo 10.7.

Accession codes and data availability

BioProject accession number for RNA-seq of isolated samples: GSE196917

Acknowledgments

We thank all patients and staff at Gynmed Clinic (Vienna) for providing placental and decidual samples. We thank the FACS Core Unit at the St. Anna Children's Cancer Research Institute (Vienna) and Boris Kovacic and Dieter Printz (St. Anna Children's Cancer Research Institute Vienna) are greatly acknowledged for technical help and advices with flow cytometry-based analysis and sorting. Emir Hadzijusufovic (Division of Hematology and Hemostaseology, Department of Internal Medicine I, Medical University of Vienna) is acknowledged for technical help with cell staining. The authors would like to acknowledge support of the Clinical biomarker facility at SciLifeLab Sweden for providing assistance in protein analyses. We thank Benjamin Schuster (Vienna University of Technology) for his help with computational analysis. Thomas Weichhart (Center of Pathobiochemistry and Genetics, Institute of Medical Genetics, Medical University of Vienna, Vienna) is acknowledged for scientific discussion.

This work was supported by the Austrian Science Fund (P33485 to J.P.) and by the Austrian National Bank (17613ONB to J.P.).

Author contributions

Conceptualization, J. Pollheimer, S. Vondra, A.L. Höbler, A.I. Lackner, R. Bauer, J. Kargl, J. Ernerudh. Formal analysis, J. Pollheimer, S. Vondra, A.L. Höbler, A.I. Lackner, J. Raffetseder, Z.N. Mihalic, V. Kunihs, P. Haslinger, S. Haider, J. Kargl, H. Husslein. Funding acquisition, J. Pollheimer. Methodology, J. Pollheimer, S. Vondra, A.L. Höbler, A.I. Lackner, J. Raffetseder, S. Haider, R. Oberle, M. Wahrmann, J. Ernerudh, J. Kargl. Intellectual input, J. Pollheimer, S. Vondra, A.L. Höbler, A.I. Lackner, J. Raffetseder, L. Saleh, S. Haider, M. Wahrmann, R. Bauer, J. Kargl, H. Husslein, P. Latos, M. Knöfler, J. Ernerudh. Supervision, J.

810   Pollheimer. Visualization, J. Pollheimer, S. Vondra, A.L. Höbler, A.I. Lackner. Writing, J.

811   Pollheimer, S. Vondra, A.L. Höbler, A.I. Lackner.

813   All authors discussed the manuscript.

Competing Interests

816   Disclosures: The authors declare no competing interests exist.

References

1. Knofler M*, et al.* (2019) Human placenta and trophoblast development: key molecular mechanisms and model systems. *Cell Mol Life Sci* 76(18):3479-3496.
2. Brosens I, Pijnenborg R, Vercruysse L, & Romero R (2011) The "Great Obstetrical Syndromes" are associated with disorders of deep placentation. *Am J Obstet Gynecol* 204(3):193-201.
3. Erlebacher A (2013) Immunology of the maternal-fetal interface. *Annu Rev Immunol* 31:387-411.
4. Moffett A, Chazara O, & Colucci F (2017) Maternal allo-recognition of the fetus. *Fertil Steril* 107(6):1269-1272.
5. Pollheimer J, Vondra S, Baltayeva J, Beristain AG, & Knofler M (2018) Regulation of Placental Extravillous Trophoblasts by the Maternal Uterine Environment. *Front Immunol* 9:2597.
6. Gamliel M*, et al.* (2018) Trained Memory of Human Uterine NK Cells Enhances Their Function in Subsequent Pregnancies. *Immunity* 48(5):951-962 e955.
7. Tilburgs T, Evans JH, Crespo AC, & Strominger JL (2015) The HLA-G cycle provides for both NK tolerance and immunity at the maternal-fetal interface. *Proc Natl Acad Sci U S A* 112(43):13312-13317.
8. Nancy P*, et al.* (2012) Chemokine gene silencing in decidual stromal cells limits T cell access to the maternal-fetal interface. *Science* 336(6086):1317-1321.
9. Vento-Tormo R*, et al.* (2018) Single-cell reconstruction of the early maternal-fetal interface in humans. *Nature* 563(7731):347-353.
10. Thomas JR*, et al.* (2021) Phenotypic and functional characterization of first-trimester human placental macrophages, Hofbauer cells. *J Exp Med* 218(1).
11. Plaisier M*, et al.* (2007) Different degrees of vascularization and their relationship to the expression of vascular endothelial growth factor, placental growth factor, angiopoietins, and their receptors in first-trimester decidual tissues. *Fertil Steril* 88(1):176-187.
12. Windsperger K*, et al.* (2020) Densities of decidual high endothelial venules correlate with T-cell influx in healthy pregnancies and idiopathic recurrent pregnancy losses. *Hum Reprod* 35(11):2467-2477.
13. Abbas Y*, et al.* (2019) Tissue stiffness at the human maternal-fetal interface. *Hum Reprod* 34(10):1999-2008.
14. McGovern N*, et al.* (2014) Human dermal CD14(+) cells are a transient population of monocyte-derived macrophages. *Immunity* 41(3):465-477.
15. Xue J*, et al.* (2014) Transcriptome-based network analysis reveals a spectrum model of human macrophage activation. *Immunity* 40(2):274-288.
16. Gautier EL*, et al.* (2012) Gene-expression profiles and transcriptional regulatory pathways that underlie the identity and diversity of mouse tissue macrophages. *Nat Immunol* 13(11):1118-1128.
17. Tamoutounour S*, et al.* (2013) Origins and functional specialization of macrophages and of conventional and monocyte-derived dendritic cells in mouse skin. *Immunity* 39(5):925-938.
18. Kolaczkowska E & Kubes P (2013) Neutrophil recruitment and function in health and inflammation. *Nat Rev Immunol* 13(3):159-175.
19. Zenz R*, et al.* (2005) Psoriasis-like skin disease and arthritis caused by inducible epidermal deletion of Jun proteins. *Nature* 437(7057):369-375.
20. Fan X*, et al.* (2014) Endometrial VEGF induces placental sFLT1 and leads to pregnancy complications. *J Clin Invest* 124(11):4941-4952.
21. Salvany-Celades M*, et al.* (2019) Three Types of Functional Regulatory T Cells Control T Cell Responses at the Human Maternal-Fetal Interface. *Cell Rep* 27(9):2537-2547 e2535.
22. Gordon SR*, et al.* (2017) PD-1 expression by tumour-associated macrophages inhibits phagocytosis and tumour immunity. *Nature* 545(7655):495-499.
23. Thomas G, Tacke R, Hedrick CC, & Hanna RN (2015) Nonclassical patrolling monocyte function in the vasculature. *Arterioscler Thromb Vasc Biol* 35(6):1306-1316.
24. Jakubzick C*, et al.* (2013) Minimal differentiation of classical monocytes as they survey steady-state tissues and transport antigen to lymph nodes. *Immunity* 39(3):599-610.
25. Rodero MP*, et al.* (2015) Immune surveillance of the lung by migrating tissue monocytes. *Elife* 4:e07847.
26. Lindau R*, et al.* (2021) Decidual stromal cells support tolerance at the human foetal-maternal interface by inducing regulatory M2 macrophages and regulatory T-cells. *J Reprod Immunol* 146:103330.
27. Svensson J*, et al.* (2011) Macrophages at the fetal-maternal interface express markers of alternative activation and are induced by M-CSF and IL-10. *J Immunol* 187(7):3671-3682.
28. Svensson-Arvelund J*, et al.* (2015) The human fetal placenta promotes tolerance against the semiallogeneic fetus by inducing regulatory T cells and homeostatic M2 macrophages. *J Immunol* 194(4):1534-1544.

29. Nath MC, Cubro H, McCormick DJ, Milic NM, & Garovic VD (2020) Preeclamptic Women Have
Decreased Circulating IL-10 (Interleukin-10) Values at the Time of Preeclampsia Diagnosis: Systematic
Review and Meta-Analysis. *Hypertension* 76(6):1817-1827.
30. Chaouat G, *et al.* (1995) IL-10 prevents naturally occurring fetal loss in the CBA x DBA/2 mating
combination, and local defect in IL-10 production in this abortion-prone combination is corrected by in
vivo injection of IFN-tau. *J Immunol* 154(9):4261-4268.
31. Murphy SP, Fast LD, Hanna NN, & Sharma S (2005) Uterine NK cells mediate inflammation-induced
fetal demise in IL-10-null mice. *J Immunol* 175(6):4084-4090.
32. Hamilton GS, Lysiak JJ, Watson AJ, & Lala PK (1998) Effects of colony stimulating factor-1 on human
extravillous trophoblast growth and invasion. *J Endocrinol* 159(1):69-77.
33. Houser BL, Tilburgs T, Hill J, Nicotra ML, & Strominger JL (2011) Two unique human decidual
macrophage populations. *J Immunol* 186(4):2633-2642.
34. Allenspach EJ, Lemos MP, Porrett PM, Turka LA, & Laufer TM (2008) Migratory and lymphoid-
resident dendritic cells cooperate to efficiently prime naive CD4 T cells. *Immunity* 29(5):795-806.
35. Itano AA, *et al.* (2003) Distinct dendritic cell populations sequentially present antigen to CD4 T cells
and stimulate different aspects of cell-mediated immunity. *Immunity* 19(1):47-57.
36. Ruffell B & Coussens LM (2015) Macrophages and therapeutic resistance in cancer. *Cancer Cell*
27(4):462-472.
37. Kostlin N, *et al.* (2014) Granulocytic myeloid derived suppressor cells expand in human pregnancy and
modulate T-cell responses. *Eur J Immunol* 44(9):2582-2591.
38. Kang X, *et al.* (2016) Granulocytic myeloid-derived suppressor cells maintain feto-maternal tolerance
by inducing Foxp3 expression in CD4+CD25-T cells by activation of the TGF-beta/beta-catenin
pathway. *Mol Hum Reprod* 22(7):499-511.
39. Bronte V, *et al.* (2016) Recommendations for myeloid-derived suppressor cell nomenclature and
characterization standards. *Nat Commun* 7:12150.
40. Ardi VC, Kupriyanova TA, Deryugina EI, & Quigley JP (2007) Human neutrophils uniquely release
TIMP-free MMP-9 to provide a potent catalytic stimulator of angiogenesis. *Proc Natl Acad Sci U S A*
104(51):20262-20267.
41. Bekes EM, *et al.* (2011) Tumor-recruited neutrophils and neutrophil TIMP-free MMP-9 regulate
coordinately the levels of tumor angiogenesis and efficiency of malignant cell intravasation. *Am J*
Pathol 179(3):1455-1470.
42. van Furth R, *et al.* (1972) The mononuclear phagocyte system: a new classification of macrophages,
monocytes, and their precursor cells. *Bull World Health Organ* 46(6):845-852.
43. Ginhoux F & Guilliams M (2016) Tissue-Resident Macrophage Ontogeny and Homeostasis. *Immunity*
44(3):439-449.
44. Palis J, Robertson S, Kennedy M, Wall C, & Keller G (1999) Development of erythroid and myeloid
progenitors in the yolk sac and embryo proper of the mouse. *Development* 126(22):5073-5084.
45. Klein I, *et al.* (2007) Kupffer cell heterogeneity: functional properties of bone marrow derived and
sessile hepatic macrophages. *Blood* 110(12):4077-4085.
46. Ginhoux F, *et al.* (2010) Fate mapping analysis reveals that adult microglia derive from primitive
macrophages. *Science* 330(6005):841-845.
47. Bittmann I, *et al.* (2001) Cellular chimerism of the lung after transplantation. An interphase cytogenetic
study. *Am J Clin Pathol* 115(4):525-533.
48. Byrne AJ, *et al.* (2020) Dynamics of human monocytes and airway macrophages during healthy aging
and after transplant. *J Exp Med* 217(3).
49. Bajpai G, *et al.* (2018) The human heart contains distinct macrophage subsets with divergent origins
and functions. *Nat Med* 24(8):1234-1245.
50. van de Laar L, *et al.* (2016) Yolk Sac Macrophages, Fetal Liver, and Adult Monocytes Can Colonize an
Empty Niche and Develop into Functional Tissue-Resident Macrophages. *Immunity* 44(4):755-768.
51. Okabe Y & Medzhitov R (2014) Tissue-specific signals control reversible program of localization and
functional polarization of macrophages. *Cell* 157(4):832-844.
52. Pathria P, Louis TL, & Varner JA (2019) Targeting Tumor-Associated Macrophages in Cancer. *Trends*
Immunol 40(4):310-327.
53. Tseng D, *et al.* (2013) Anti-CD47 antibody-mediated phagocytosis of cancer by macrophages primes an
effective antitumor T-cell response. *Proc Natl Acad Sci U S A* 110(27):11103-11108.
54. Celada A & Maki RA (1992) Transforming growth factor-beta enhances the M-CSF and GM-CSF-
stimulated proliferation of macrophages. *J Immunol* 148(4):1102-1105.
55. Haider S, *et al.* (2016) Notch1 controls development of the extravillous trophoblast lineage in the
human placenta. *Proc Natl Acad Sci U S A* 113(48):E7710-E7719.
56. Nowicka M, *et al.* (2017) CyTOF workflow: differential discovery in high-throughput high-dimensional
cytometry datasets. *F1000Res* 6:748.
57. Dobin A, *et al.* (2013) STAR: ultrafast universal RNA-seq aligner. *Bioinformatics* 29(1):15-21.

58. Love MI, Huber W, & Anders S (2014) Moderated estimation of fold change and dispersion for RNA-
seq data with DESeq2. *Genome Biol* 15(12):550.
59. Zhu A, Ibrahim JG, & Love MI (2019) Heavy-tailed prior distributions for sequence count data:
removing the noise and preserving large differences. *Bioinformatics* 35(12):2084-2092.
60. Ritchie ME*, et al.* (2015) limma powers differential expression analyses for RNA-sequencing and
microarray studies. *Nucleic Acids Res* 43(7):e47.
61. Ashburner M*, et al.* (2000) Gene ontology: tool for the unification of biology. The Gene Ontology
Consortium. *Nat Genet* 25(1):25-29.
62. Gene Ontology C (2021) The Gene Ontology resource: enriching a GOld mine. *Nucleic Acids Res*
49(D1):D325-D334.
63. Reimand J, Kull M, Peterson H, Hansen J, & Vilo J (2007) g:Profiler--a web-based toolset for
functional profiling of gene lists from large-scale experiments. *Nucleic Acids Res* 35(Web Server
issue):W193-200.
64. Butler A, Hoffman P, Smibert P, Papalexi E, & Satija R (2018) Integrating single-cell transcriptomic
data across different conditions, technologies, and species. *Nat Biotechnol* 36(5):411-420.
65. Hao Y*, et al.* (2021) Integrated analysis of multimodal single-cell data. *Cell* 184(13):3573-3587 e3529.
66. Satija R, Farrell JA, Gennert D, Schier AF, & Regev A (2015) Spatial reconstruction of single-cell gene
expression data. *Nat Biotechnol* 33(5):495-502.
67. Stuart T*, et al.* (2019) Comprehensive Integration of Single-Cell Data. *Cell* 177(7):1888-1902 e1821.
68. Valadez-Cosmes P*, et al.* (2021) Identification of Novel Low-Density Neutrophil Markers Through
Unbiased High-Dimensional Flow Cytometry Screening in Non-Small Cell Lung Cancer Patients.
Front Immunol 12:703846.
960
961

Supplementary Data

Fig. S1 presents a schematic illustrating how decidual samples were processed for

characterization and their cellular densities after enzymatic digestion. **Fig. S2** shows the

characterization of tissue-resident macrophages and presents the distribution of immune

cells in the secretory endometrium, decB, and decP samples. **Fig. S3** shows the data for

chemoattractant assays performed with decB- and decP-CMs using PBMCs. **Fig. S4**

represents PCA and gene set enrichment analysis of RNA-seq data and shows the

secretome of decidual explants and neutrophils. **Fig. S5** shows the capacity of EVT-CM-

treated decPAMs to induce Treg formation of isolated blood-derived T cells. **Data S1**

presents the complete list of measured factors by the Olink proteomics platform (related to

Fig. 1, D). **Table S1** provides a list of antibodies used in this study.

983