Targeting Epsins by nanotherapy regulates lipid metabolism and promotes

ABCG1-mediated cholesterol efflux to fortify atheroma regression

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Abstract: Resolving atheromas and hindering their transition into vulnerable atherosclerotic plaques is imperative to prevent deadly episodes such as heart attacks and strokes. Excess cholesterol accumulation in lesional macrophages switches on a complex inflammatory response in atherosclerosis. Despite the development of new cholesterol-lowering therapies, including of the recently approved PCSK9 small interfering RNA (siRNA) antagonists, patients still face a tremendous risk of developing major acute cardiovascular events resulting from chronic inflammation in the plaque. We previously showed that Epsins, a family of endocytic adaptors, fuel inflammation in atherosclerosis; however, the underlying mechanism and the therapeutic potential of targeting Epsins remains largely unknown. Here, we report that Epsins regulate lipid metabolism and transport in atherosclerotic macrophages, and that inhibiting Epsins by nanotherapy halts inflammation and accelerates atheroma resolution. Harnessing lesional macrophage-specific nanoparticle (NP) delivery of Epsin siRNAs, we show that silencing of macrophage Epsins markedly diminishes atherosclerotic plaque size and promotes plaque regression. Mechanistically, we demonstrate that Epsins bind to CD36 to facilitate lipid uptake by enhancing CD36 endocytosis and recycling. Conversely, Epsins promote ABCG1 degradation via lysosomes and hamper ABCG1-mediated cholesterol efflux and reverse cholesterol transport. In a myeloid-specific Epsin double knockout mouse model (LysM-DKO) with a genetic reduction in ABCG1 (LysM-DKO-ABCG1$^{fl/+}$), the enhanced cholesterol efflux and reverse transport due to Epsin deficiency was suppressed. Our findings suggest that targeting Epsins in lesional macrophages may offer therapeutic benefits in treating advanced atherosclerosis.

INTRODUCTION

Atherosclerosis is a complex and chronic condition that results in a buildup of fatty deposits, called plaques, inside the artery. Atherosclerosis is the root cause of coronary heart disease, ischemic stroke, and peripheral arterial disease (Libby, 2012; Weber and Noels, 2011). Despite effective lipid-lowering therapies including new drugs of antibody and siRNA drugs targeting PCSK9, atherosclerosis is still the leading cause of mortality worldwide. Atherosclerotic lesion formation involves interactions between oxidized low-density lipoprotein (oxLDL) and prominent constituents of the arterial wall including monocyte-derived macrophages, immune cells, and vascular smooth muscle cells (Glass and Witztum, 2001; Wang et al., 2020). Amounting evidence support that constituents with the potential to promote macrophage egress from the plaque such as regulatory T cells play a critical role in regulating macrophage pro-resolving functions during atherosclerosis regression (Moore et al., 2013; Sharma et al., 2020). Furthermore, the pro-inflammatory effects of oxLDL lead to endothelial activation and macrophage recruitment (Steinberg, 2009). Invading macrophages in the sub-endothelium ingest modified LDL and transform into lipid-laden foam cells (Glass and Witztum, 2001; Libby, 2012). This escalates arterial inflammation—a prime contributor to the transition from a stable to vulnerable atheroma (Alsheikh-Ali et al., 2010; Doring, 2015; Hansson et al., 2015; Virmani et al., 2006). Accordingly, patients that receive a therapeutic cocktail aimed at alleviating dyslipidemia and hypertension still develop deleterious cardiovascular diseases (Charo and Taub, 2011; Weber and Noels, 2011). This accentuates the urgent need for next-generation therapies geared toward eradicating inflammation in the arterial wall.

Epsins are a family of highly-conserved endocytic adaptor proteins that associate with the plasma membrane through interactions between their N-terminal homology (ENTH) domain and

membrane PI (4,5) P2 (De Camilli et al., 2002; Itoh et al., 2001; Rosenthal et al., 1999), where it

recognizes and recruits ubiquitinated cell surface receptors to clathrin-coated pits for

internalization via its ubiquitin-interacting motif (UIM) and clathrin/AP-2 binding sites,

respectively (Chen and De Camilli, 2005; Cui et al., 2020; Polo et al., 2002; Shih et al., 2002).

Epsins 1 and 2 are ubiquitously expressed, redundant in function, and essential for embryonic

survival (Chen et al., 2009). The embryonic lethality of Epsin 1 and 2 double knockout mice

(DKO) prompted us to generate conditional Epsin1$^{fl/fl}$; Epsin2$^{-/-}$ mice. Combining DKO strains

with specific Cre deleter mouse strains creates tissue and cell type-specific DKO mice (Chen et

al., 2009; Tessneer et al., 2014). Despite their multifaceted functions, our previous work

demonstrates that Epsins possess a vast degree of specificity and selectivity in choosing their

binding partners. Therefore, the actions of Epsins are cell context-dependent (Brophy et al., 2019;

Chang et al., 2015; Chen et al., 2009; Dong et al., 2020; Dong et al., 2021; Liu et al., 2014; Pasula

et al., 2012; Tessneer et al., 2014). Notably, we demonstrated that myeloid-specific Epsins loss

downregulated inflammation and impeded atheroma formation in an atherogenic mouse model by

stabilizing macrophage LRP-1 (Brophy et al., 2019). However, this model failed to address the

role of epsins in hindering atheroma regression and promoting plaque rapture and consequent

debilitating episodes.

Lesional macrophages internalize lipids primarily through scavenger receptor-mediated

endocytosis (Moore and Freeman, 2006), which is also responsible for foam cell formation

(Febbraio et al., 2000; Kunjathoor et al., 2002; Nozaki et al., 1995; Ouimet et al., 2017; Podrez et

al., 2000). Mice lacking both Scavenger Receptor-A (SR-A) and CD36 revealed that CD36 is the

major oxLDL receptor required for foam cell formation (Febbraio et al., 2000; Kunjathoor et al.,

2002; Nozaki et al., 1995; Podrez et al., 2000). Our previous studies revealed that Epsins 1 and 2

are upregulated in lesional macrophages (Brophy et al., 2019). Epsin-deficient (DKO)

macrophages exhibited a striking reduction in foam cell formation (Brophy et al., 2019). As robust

lipid uptake by macrophages is one of major responsible factors that drive foam cell formation, we

posit a central role Epsins play in regulating lipid uptake in macrophages. However, how Epsins

facilitate lipid uptake and whether this is through scavenger receptor-mediated uptake of modified

LDL during foam cell formation remains elusive.

Reverse cholesterol transport (RCT) is responsible for removing excess cholesterol from

peripheral tissues to the liver, where it is reused or removed from the body (Ohashi et al., 2005).

A critical part of RCT is cholesterol efflux, where accumulated cholesterol removed from

macrophages in the subintima is mediated by ATP-binding membrane cassette transporters

(ABCA1 and ABCG1) and other molecules (Kennedy et al., 2005; Westerterp et al., 2016; Yvan-

Charvet et al., 2007). Among the regulators of RCT, ABCG1 plays a prominent role in

macrophage cholesterol and phospholipid transport to maintain cellular lipid homeostasis by

using high density lipoprotein (HDL) as a cholesterol acceptor (Sag et al., 2015). HDL is thought

to facilitate macrophages re-programming to be less inflammatory through an ATF-3-dependent

pathway (Moore and Fisher, 2014). Several clinical trials and more recent work suggest that

increased HDL-cholesterol concentrations fail to improve cardiovascular disease outcomes

(Keene et al., 2014; Nicholls et al., 2018; Tardif et al., 2007); however, new data indicate that

rather than the steady-state HDL-cholesterol (HDL-C) levels (Hewing et al., 2012), the ability of

HDL particles to transport cholesterol from atherosclerotic plaques to the liver is more important

(Josefs et al., 2021; Khera et al., 2011). Consequently, a shift in focus from increasing HDL-

cholesterol concentrations to raising RCT function by increasing cholesterol efflux capacity

(CEC), the HDL-ABCG1-mediated cholesterol efflux from macrophages, has become a

prospective therapy for coronary artery disease (CAD), especially in severe acute myocardial

infarction (AMI) patients (Capodanno et al., 2018; Ouimet et al., 2019; Rohatgi et al., 2014;

Silvain et al., 2019). As lack of effective cholesterol efflux in macrophages hinders the reversal

of foam cells back to healthy macrophages, we envision a major role macrophage Epsins play in

regulating cholesterol efflux. Given the importance of cholesterol efflux and RCT in atheroma

resolution and aforementioned risk reduction in AMI patients (Kennedy et al., 2005; Westerterp

et al., 2016; Yvan-Charvet et al., 2007), it is crucial to determine whether Epsins inhibit

cholesterol efflux and RCT to impede atherosclerotic plaque progression and promote its

regression.

In this study, we harnessed novel nanotechnology and are the first to unveil the detrimental

role of epsins in prohibiting atheroma regression and promoting plaque rapture using a preclinical

atherosclerosis regression model. Mechanistically, we utilized RNA seq analysis of macrophages

to identify new targets involved in lipid metabolism during atherosclerosis. Based on these new

targets, we employed a novel myeloid-specific-deficient ABCG1 animal model to uncover how

epsins regulate lipid metabolism to propel atherosclerosis. Specifically, we show that epsins

facilitate CD36-mediated lipid uptake and inhibit ABCG1-mediated cholesterol efflux, which is

entirely new in the field of lipid metabolism. Secondary, we employed an originally designed

macrophage-specific nanoparticle delivery system to investigate the therapeutic prevention for

atherosclerosis. Lastly, an early-stage progression model, an advanced-stage progression model,

and a regression model of atherosclerosis have been employed to demonstrate a profound

therapeutic benefit in treating atherosclerosis by the aforementioned nanoparticle delivery system.

we believe our vigorous and novel mechanistic study on lipid metabolism, and clinically relevant

nanoparticle-mediated RNAi therapies represents an impactful advance for treating this

devastating disease.

RESULTS

RNA-Seq analyses reveal that Epsins regulate cholesterol metabolism and efflux pathways

Molecular mechanisms underlying Epsin-mediated regulation of foam cell formation and

promotion of lipid uptake by macrophages are poorly understood. As an unbiased and genome

wide approach, we performed RNA-seq analysis on macrophages isolated from wild type (WT)

and DKO mice. Loss of Epsins 1 and 2 significantly altered the expression of 2208 genes. These

include 1138 downregulated and 1070 upregulated genes (Fig. S1A-S1C). Notably, the differential

genes are associated with cholesterol efflux and metabolism, suggesting that Epsins play a role in

regulating lipid cholesterol metabolism and efflux pathways (Fig. 1A). Consistently, Gene

Ontology (GO) enrichment analysis featured pathways including regulation of cholesterol

metabolic process, lipid catabolic process, sterol biosynthetic process, macrophage migration, and

regulation of immune effector process (Fig. 1B). Furthermore, Gene Set Enrichment Analysis

(GSEA) showed that enriched genes that are related to fatty acid metabolism tended to be markedly

downregulated in DKO macrophages (Fig. 1C). In contrast, genes associated with cholesterol

transport and efflux (Fig. 1D), and negative regulation of macrophage foam cell formation (Fig.

1E), tended to be upregulated by Epsin deficiency.

CD36 is one of the major scavenger receptors responsible for oxLDL uptake in macrophages,

and deletion of CD36 in macrophages reduces foam cell formation and atherosclerosis (Kunjathoor

et al., 2002; Podrez et al., 2000). Likewise, Epsin deficiency also reduced foam cell formation and

lipid uptake in macrophages (Brophy et al., 2019). The similar phenotype shared by Epsin

deficiency and CD36 deficiency promoted us to explore the relationship between Epsins and CD36.

We compared our DKO macrophage RNA-seq data with a public RNA-seq data from wild type

and CD36 knockout (CD36KO) macrophages in the public database (Chen et al., 2019). We

observed a significant overlap of differential genes induced by the Epsin-DKO and CD36KO

mouse macrophages. There were 169 genes significantly upregulated by both Epsin-DKO and

CD36KO (4-fold enrichment compared to the 41 genes expected by random chance, Fisher's exact

test p value 9.73 x 10^{-25}) (Fig. 1F left panels); 29 genes (6-fold enrichment, Fisher's exact test P

value 6.15 x 10^{-9}) were downregulated by both Epsin-DKO and CD36KO (Fig. 1F right panels).

Heatmap indicated that the genes significantly regulated only by Epsin-DKO still tends to be

regulated by CD36KO in the same direction, although to a non-significant degree (Fig. 1G). These

results are consistent with GO analysis that revealed a number of common pathways regulated by

Epsin or CD36 deficiency. These include the downregulation of inflammation pathway, lipid

biosynthetic process, triglyceride metabolic process, and upregulation of small GTPase mediated

signal transduction pathway (Fig. 1H). Examples of differentially regulated genes in Espin-DKO

and CD36KO macrophages include the Ccnd2 that is a cell cycle regulator (Fig. S2A) (Meyerson

and Harlow, 1994), the Ch25h that is a cholesterol biosynthesis repressor (Fig. S2B) (Lund et al.,

1998), and the Ccl9 that is a chemokine (Fig. S2C) (Yu et al., 2002). These results indicate that

Epsins and CD36 play superimposing roles in regulating molecular pathways involved in lipid

metabolism and inflammation.

To further interrogate the molecular mechanisms governing Epsin-mediated lipid uptake, we

sought to compare our RNA-seq data to the RNA-seq data obtained from non-foam cell

macrophages and macrophage-derived foam cells (Kim et al., 2018). Interestingly, we found an

intimate reversal relationship in gene expression patten between DKO macrophages and foam cells.

Specifically, genes downregulated by DKO in macrophages tend to be highly upregulated in foam

cells relative to macrophages (Fig. S3A and S3B). Also, genes upregulated by DKO in

macrophages tend to be downregulated in foam cells relative to macrophages (Fig. S3C and S3D).

These results substantiated our previous findings that Epsin loss prevents foam cell formation.

Epsin promotes CD36-mediated lipid uptake by promoting CD36 endocytosis and recycling

Based on the bioinformatic results, we hypothesized that Epsins regulate CD36 internalization

and lipid uptake. We performed qRT-PCR, western blot (WB) and flow cytometry to check the

RNA, total protein, and surface protein levels of CD36. Interestingly, RNA (Fig. 2A) and total

protein (Fig. 2B) expression of CD36 remained unchanged between WT and DKO macrophages.

However, the surface protein level of CD36 significantly decreased with the treatment of oxLDL

in WT, but not in DKO macrophages (Fig. 2C and S4). Immunofluorescence staining (IF) revealed

oxLDL-induced CD36 trafficking to early endosomes. We observed colocalization of CD36 with

EEA1 (early endosome antigen 1, Fig. 2D) and Rab11 (recycling endosome marker, Fig. 2E) in

WT macrophages treated with oxLDL, which was not observed in DKO macrophages.

To further study the role of Epsins in regulating macrophage lipid uptake, we stained oxLDL-

treated WT and DKO macrophages with BODIPY and Oil Red O (ORO). Deficiency of Epsins

impaired oxLDL uptake and foam cell formation (Fig. 2F and S5) and reduced cholesterol and

triglyceride levels (Fig. 2G) in DKO macrophages. Flow cytometry confirmed that macrophage

lipid uptake was reduced in DKO macrophages using DiI-oxLDL treatment (Fig. 2H and S4).

Together, these results indicate that Epsins are crucial for CD36-mediated lipid uptake and

cholesterol metabolism.

Epsin ENTH domain is required for CD36-mediated lipid uptake and foam cell formation

Next, we investigated how Epsins and CD36 interact to cause the disparity in CD36 surface

and total protein levels using immunoprecipitation (IP) and WB. We determined that CD36 binds

Epsin1 in WT, but not in DKO macrophages (Fig. 3A). This indicated that Epsin1 and CD36

interact endogenously. We then determined which Epsin regions were responsible for this

interaction. We created Flag-tagged mammalian Epsin1 wild type full length and ENTH or UIM

deleted constructs (FLAG-Epsin1^{WT}, FLAG-Epsin1$^{\triangle ENTH}$ or FLAG-Epsin1$^{\triangle UIM}$) (Fig. 3B). Then

we transfected these constructs to HEK 293T cells and performed co-IP with CD36. The

interaction between Epsin1 and CD36 was Epsin dependent on the ENTH domain as the binding

between Epsin1$^{\triangle ENTH}$ and CD36 was dramatically reduced in FLAG-Epsin1$^{\triangle ENTH}$-expressing cells

(Fig. 3B). As expected, we did not detect ubiquitinated CD36 in response to oxLDL treatment in

the presence of the proteasome inhibitor MG132 (Fig. 3C). In addition, we transfected the Epsin

full length and deletion Epsin constructs into WT and DKO macrophages treated with oxLDL. The

transfection of full-length Epsin restored lipid uptake in DKO macrophages, which was not

observed in cells expressing FLAG-Epsin1$^{\triangle ENTH}$ (Fig. 3D, 3E and S6).

RNA-seq analyses of WT, Epsin-DKO and ABCG1-KO macrophages reveal that Epsins and

ABCG1 reciprocally regulate inflammation and lipid metabolism pathways

Emerging evidence spotlighted raising RCT function by increasing HDL-cholesterol efflux

capacity (CEC) to prominence as a prospective strategy to treat repeat heart attacks. We have

generated myeloid-specific ABCG1-knock out (ABCG1-KO) mice. Given intimate relationship of

HDL with ABCG1 in regulating cholesterol efflux, and involvement of Epsins in cholesterol efflux

regulation, we performed RNA-seq analysis of WT, ABCG1-KO and Epsin-DKO macrophages.

The loss of ABCG1 in macrophages significantly altered the expression of 1733 genes, including

986 downregulated and 747 upregulated genes (Fig. S7A-S7C). GSEA indicated that genes

associated with the inflammatory response (Fig. 4A) and macrophage activation (Fig. 4B) are

upregulated by ABCG1-KO in macrophages. In contrast, genes negatively regulating macrophage-

derived foam cell formation are downregulated by ABCG1-KO (Fig. 4C). We further performed

GO enrichment analysis for genes up- and down-regulated in ABCG1-KO relative to WT

macrophages. Positive regulation of cytokine production, tumor necrosis factor production and

acute inflammatory response were upregulated by ABCG1-KO in macrophages (Fig. 4D).

Negative regulation of lipid storage and cholesterol biosynthetic process were down regulated in

ABCG1-KO compared to WT macrophages (Fig. 4D). Interestingly, GSEA analyses showed that

genes associated with cell immune response (Fig. S7D), regulation of leukocyte migration (Fig.

S7E) and leukocyte proliferation (Fig. S7F) are markedly upregulated by ABCG1 deficiency in

macrophages. In contrast, these genes are drastically downregulated in DKO macrophages (Fig.

S7D-S7F), These results suggest that Epsins and ABCG1 reciprocally regulate inflammation

pathways. Examination of individual gene expression confirmed common target genes reversely

regulated by Epsins and ABCG1. For instance, Itgb3 prevents the differentiation of macrophages

and monocytes into foam cells (Antonov et al., 2004) and was up and down regulated by DKO and

ABCG1-KO, respectively (Fig. 4E). In addition, GO enrichment analysis revealed pathways

reversely regulated by ABCG1-KO and DKO in macrophages (Fig. 4F). Our RNA-seq analyses

from ABCG1-KO and Epsin-DKO further support that Epsins and ABCG1 play an opposing role

in regulating cholesterol efflux and inflammatory responses and foam cell formation.

Epsin loss augments macrophage cholesterol efflux *in vitro* and RCT *in vivo*

RNA-seq analysis of WT, DKO, and ABCG1-KO macrophages indicated that the loss of

Epsins affects cholesterol efflux. At the same time, we wanted to determine if Epsins inhibit

cholesterol efflux and RCT to ameliorate atherosclerosis. WT and DKO macrophages were pre-

treated with a LXR agonist (T0901317) and incubated with [^{3}H]-cholesterol and ac-LDL. We

found that in vitro cholesterol efflux to HDL, but not ApoA-1, was markedly enhanced in DKO

versus WT macrophages (Fig. 5A and 5B). Consistently, in vivo RCT (Fig. 5C) was elevated in

mice injected with [^{3}H]-cholesterol-loaded DKO macrophages compared to WT macrophages. Our

results showed that [^{3}H]-radioactivity in liver, plasma, feces, and intestinal contents all showed

significant increases in mice injected with DKO macrophages, but not those injected with WT

macrophages (Fig. 5D-5I and S8). These findings suggest that Epsin-deficient macrophages have

higher cholesterol efflux and RCT.

Epsin-UIM domain binds ABCG1 to promote degradation via the lysosome

To investigate the molecular mechanisms underlying Epsin-mediated ABCG1 regulation, we

sought to test whether Epsins interact with ABCG1 and govern its turnover in macrophages. We

first assessed protein levels of surface receptors such as ABCG1, ABCA1, SR-A1, and LDLR in

macrophages involved in the progression of atherosclerosis. WB results showed that ABCG1, but

not ABCA1, SR-A1 and LDLR, were upregulated in primary macrophages from DKO mice when

compared to WT mice (Fig. 6A). The mRNA levels of ABCG1 in both WT and DKO macrophages

remain unchanged (Fig. S9). Because ABCG1 is known to mediate cholesterol efflux to HDL

(Ouimet et al., 2019), we hypothesized that Epsins bind ABCG1 under atherosclerotic conditions

and promote ABCG1 ubiquitin-dependent degradation to inhibit cholesterol efflux in macrophages

and facilitate development of atherosclerosis. Indeed, when the isolated peritoneal macrophages

from DKO and WT mice were pretreated with a liver X receptor (LXR) activator followed by a

cell surface biotinylation assay, we observed significantly elevated levels of biotinylated ABCG1

in DKO macrophages (Fig. 6B). We also performed flow cytometry and observed that only WT

macrophages showed a decreased surface level of ABCG1 with the oxLDL treatment (Fig. 6C and

S10). Therefore, decreased total and surface levels of ABCG1 in WT macrophages implies that

Epsins promote ABCG1 degradation.

We next sought to determine how Epsins caused increases in total and surface protein levels

of ABCG1 in macrophages from DKO mice. When peritoneal or bone marrow-derived

macrophages from WT and DKO mice were lysed and processed for IP with anti-Epsin1 antibodies,

we observed ABCG1 in WT macrophages, but not in DKO macrophages (Fig. 6D). This suggested

that Epsins bind to ABCG1. Accordingly, we determined that Epsin interacted with ABCG1 via

Epsin UIM domain, which was confirmed by transfection of Flag-tagged mammalian Epsin wild

type full length, ENTH, or UIM deletion constructs as well as ABCG1 plasmid to HEK 293T cells

(Fig. 6E). We showed that ABCG1 is ubiquitinated in response to oxLDL, allowing Epsins to

interact with ABCG1 through their UIM, which promotes ABCG1 lysosomal degradation (Fig.

6F). In addition, we observed oxLDL-induced ABCG1 trafficking to early endosomes (Fig. 6G)

and lysosomes (Fig. 6H) in WT macrophages, but not DKO cells.

To substantiate that elevated cholesterol efflux and RCT were a result of increased total and

surface levels of ABCG1 in ApoE$^{-/-}$/LysM-DKO macrophages, we created ApoE$^{-/-}$/LysM-DKO-

ABCG1$^{fl/+}$ mice by crossing the ApoE$^{-/-}$/LysM-DKO mouse strain with ABCG1 (flox/+)

heterozygous mice to generate a novel mouse model (ApoE$^{-/-}$/LysM-DKO/ABCG1$^{myeloid-het}$) with

genetically-reduced ABCG1 levels in Epsin-deficient macrophages (Fig. 5J). We observed

reduced gene (Fig. 5K) and protein (Fig. 5L) expression of ABCG1 in ApoE$^{-/-}$/LysM-DKO-

ABCG1$^{fl/+}$ macrophages. The LysM-DKO-ABCG1$^{fl/+}$ macrophages showed less cholesterol efflux

to HDL and RCT compared to ApoE$^{-/-}$/LysM-DKO macrophages (Fig. 5A, 5B and 5D-5I). These

studies demonstrate that the deficiency of Epsins in macrophages specifically enhanced ABCG1-

mediated cholesterol efflux to HDL and RCT, which is inversely related to the risk of atherosclerotic

cardiovascular disease. In accordance, immunostaining of human patient aortic arch (Fig. S11A) and

mouse aortic root (Fig. S11B) sections revealed that ABCG1 expression is inversely associated

with atherosclerotic plaque severity, i.e., there is considerable reduction in ABCG1 expression in

more severe atheroma compared to that in less severe atherosclerotic plaques in both human and

mouse atheromas.

S2PNP-siEpsin1/2 hinders progression of early and advanced stages of atherosclerosis

Since we found that Epsins facilitate internalization of CD36-mediated lipid uptake and

promotes ABCG1 degradation to inhibit ABCG1-mediated cholesterol efflux, we sought to

determine whether targeting Epsins could prevent the progression of atherosclerosis. We used a

targeted NP platform (Tao et al., 2020) modified with a lesional macrophage-specific targeting

peptide (S2P) for systemic delivery of Epsins 1 and 2 siRNA combinations (S2PNP-siEpsin1/2)

(Fig. S12A).

Isolated macrophages from WT mice were treated with S2PNP-siControl (S2PNP-siCtrl) or

S2PNP-siEpsin1/2. Then, RNA and protein were isolated to check the *in vitro* silencing efficacy

of the NPs (Fig. S12B and S12C). To assess the effect of NPs on *in vitro* peritoneal macrophage

lipid loading, cells isolated from ApoE$^{-/-}$ mice were treated with S2PNP-siCtrl or S2PNP-

siEpsin1/2 for 24h followed by treatment with oxLDL or plasma isolated from ApoE$^{-/-}$ mice fed a

WD for 8 weeks. The treatment of oxLDL or plasma demonstrated decreased lipid uptake by

S2PNP-siEpsin1/2-treated macrophages compared to S2PNP-siCtrl treated cells (Fig. S13A and

S13B).

ApoE$^{-/-}$ mice fed a WD for 8 weeks (early stage, Fig. S14) or 17 weeks (advanced stage, Fig.

7) were divided into three groups including baseline (before NP injection), S2PNP-siCtrl, and

S2PNP-siEpsin1/2. The baseline group was sacrificed before the injection of NPs.

S2PNP-siCtrl or S2PNP-siEpsin1/2 was intravenously injected twice a week for 3 weeks (Fig.

S14A and 7A). Digested lesions from S2PNP-siCtrl or S2PNP-siEpsin1/2 treated mice were used

for WB to check *in vivo* silencing of Epsins 1 and 2 (Fig. S14B). Additionally, the administration

of S2PNP-siEpsin1/2 resulted in not only a decrease in lesional macrophage accumulation, but

also a significant reduction of Epsins 1 and 2 expressions within the atherosclerotic plaques as

showed by diminished CD68 and Epsins 1 and 2 staining in the aortic root sections (Fig. S14C and

S14D). *En face* ORO staining in aortas, aortic roots, and brachiocephalic artery (BCA) sections

(Fig. S14E, 7B and 7C) showed reduced lesion size, lesion number, and retarded progression of

both early (11 weeks on WD) and advanced (20 weeks on WD) stages atherosclerosis in ApoE$^{-/-}$

mice treated with S2PNP-siEpsin1/2 opposed to the S2PNP-siCtrl group.

Inhibiting the transition of atheroma from stable lesion to vulnerable plaque is paramount in

preventing heart attacks and strokes. We observed elevated smooth muscle cell contents and

reduced macrophage accumulation (Fig. 7D), increased elastic fibers and collagen content (Fig.

S15), and reduced necrotic core area (Fig. 7E) within the atherosclerotic lesions in S2PNP-

siEpsin1/2 treated mice compared to S2PNP-siCtrl group. In addition, we observed no changes in

plasma total cholesterol, triglycerides, or HDL and non-HDL cholesterol levels between S2PNP-

siCtrl and S2PNP-siEpsin1/2 treated mice (Fig. S16). These features suggest that the

administration of lesion macrophage-specific targeting NPs containing Epsin1/2 siRNA can

stabilize the atherosclerotic plaques without affecting the plasma cholesterol levels.

S2PNP-siEpsin1/2 promotes atheroma resolution by diminishing inflammation and

enhancing lesion stability

Given the critical role of macrophage cholesterol efflux and RCT in atheroma resolution, we

also wanted to assess the therapeutic effects of S2PNP-siEpsin1/2 on atheroma resolution. We

established another mouse model by injecting proprotein convertase subtilisin kexin type 9-adeno-

associated virus-8 (AAV8-PCSK9D377Y) into C57BL/6 mice. This generated an atherosclerosis

mouse model harboring a gain-of-function PCSK9 mutant (Oppi et al., 2019). This model mimics

LDLR null mice (Brophy et al., 2019) and requires no genetic modification (Oppi et al., 2019).

Another advantage of this mouse line is that a single AAV injection is sufficient to generate

atherosclerotic mice by WD feeding compared to long-term crossbreeding with ApoE$^{-/-}$ or LDLR^{-}

$^{/-}$ mice.

To test if S2PNP-siEpsin1/2 treatment can promote atheroma resolution, PCSK9-AAV8 mice

fed a WD for 16 weeks followed by 4 weeks of a normal diet with S2PNP-siCtrl or S2PNP-

siEpsin1/2 treatment (Fig. 8A). The latter group showed a significant reduction of lesion size and

rapid lesion regression as evidenced in the IF and ORO staining of the whole aorta, aortic root and

BCA sections (Fig. 8B, 8C, 8D and S17A). Van Gieson's trichrome staining of BCA sections

showed increased collagen content and elastic fibers in the S2PNP-siEpsin1/2 group compared to

S2PNP-siCtrl or baseline group (Fig. S17B). In addition, the IF co-staining of CD68 and α-SMA

showed reduced macrophage accumulation in the fibrous cap, reduced size of atheromatous cores,

and increased smooth muscle cell content within the atheroma cap in the S2PNP-siEpsin1/2 group

(Fig. 8C).

Adhesion molecules play a crucial role in attaching monocytes to activated endothelial cells

(EC) as well as recruiting monocytes to the sub-endothelial layer. Co-staining of CD31 with

vascular cell adhesion molecule-1 (VCAM-1, Fig. 8E), intercellular adhesion molecule-1 (ICAM-

1, Fig. 8F), P-selectin (Fig. 8G) or E-selectin (Fig. 8H) was performed using aortic root sections.

Administration of S2PNP-siEpsin1/2 significantly suppressed these adhesion molecules when

compared to S2PNP-siCtrl group. In addition, the expression of the macrophage egressing gene

CCR7 was significant increased, while the retention genes Sema3a and Netrin1 were decreased in

DKO macrophages (Fig. S17C). This is consistent with our RNA-seq analysis that showed the

deficiency of macrophage Epsins facilitates immune cell migration. Furthermore, macrophages

treated with S2PNP-siEpsin1/2 showed decreased expression of pro-inflammatory genes (iNOS,

IL-6, IL-1β, and TNF-α) and increased expression of anti-inflammatory markers (IL-10 and Arg1)

compared to the S2P-siCtrl group (Fig. 8J). These decreased pro-inflammatory cytokines lead to

reduced ICAM-1, VCAM-1, P- and E-selectins expression in ECs (Fig. 8E-8H), hindering

recruitment of additional macrophages to the lesion. Taken together, these results indicate that

specific silencing of Epsins in lesional macrophages may offer therapeutic benefits in preventing

or treating advanced atherosclerosis.

DISCUSSION

In this study, we discover that the Epsins 1 and 2 endocytic adaptor proteins govern lipid

metabolism and cholesterol transport (Fig. S18) in atherosclerotic macrophages by regulating

CD36-mediated lipid uptake (Fig. 1-3 and S1-S6) and ABCG1-dependent cholesterol efflux (Fig.

4-6 and S7-S11). Importantly, we demonstrate that targeting lesional macrophage Epsins using a

newly developed nanotechnology-based siRNA-mediated therapy halts inflammation, impedes

early and late atherogenesis (Fig. 7 and S12-S16), and accelerates atheroma resolution (Fig. 8 and

S17). By silencing lesional macrophage Epsins, we observed a reduction in necrotic core area in

atherosclerotic lesions and marked attenuation in inflammation (Fig. 7 and Fig. 8). Together, our

studies point toward a promising new strategy for the treatment of atherosclerosis.

The advent of next generation therapies targeting PCSK9, including monoclonal anti-PCSK9

antibodies and PCSK9 siRNA, is considered to be game-changing (Feingold, 2000; Fitzgerald et al.,

2017; German and Shapiro, 2020); however, these and other therapies largely ignore the rampant

inflammation that occurs in atherosclerotic arteries. Arterial inflammation is a prime contributor

to the transition from a stable to vulnerable atheroma (Alsheikh-Ali et al., 2010; Doring, 2015;

Hansson et al., 2015; Virmani et al., 2006). While anti-inflammatory medicines such as anti-

Interleukin-1β antibodies potently diminish the risk of recurrent myocardial infarction, these

treatments may come with some severe side effects (De Benedetti et al., 2018; Ridker et al., 2017).

In addition, the inability to reduce lipid ingestion while concomitantly reinforce cholesterol efflux

in lesional macrophages has impeded the battle against atherosclerosis. Our mechanistic studies

show that Epsins bind to CD36 to facilitate lipid uptake by enhancing CD36 endocytosis and

recycling. Conversely, Epsins promote ABCG1 degradation via lysosomes and hamper ABCG1-

mediated cholesterol efflux and reverse cholesterol transport. Excitingly, by harnessing the latest

development in nanomedicine and developing S2P-NPs carrying Epsin1/2 siRNAs (S2PNP-

siEpsin1/2), we show a reduction in plaque formation in both early and advanced atherosclerosis

(Fig. S14 and 7). Furthermore, in a pre-clinical atheroma resolution model, this potent approach

reduced lesional macrophage accumulation, decreased pro-inflammatory cytokine and adhesion

molecule expression, and accelerated plaque regression (Fig. 8). Taken together, our study

uncovers a novel and critical role for Epsin in regulating lipid metabolism and cholesterol efflux

as well as offers a potential new nanotherapy for treating atherosclerosis by targeting Epsins in

macrophages.

As we show that silencing of lesional macrophage Epsins reduces necrotic core size, we

reasoned that inhibiting Epsins may reinforce efferocytosis in macrophages, analogous to our

observations in DKO macrophages (Brophy et al., 2019) given that efferocytosis plays a central

role in regulating necrotic core formation (Gerlach et al., 2021; Kojima et al., 2017; Thorp et al.,

2008). Despite the fact that S2P-NPs have been shown to only negligibly target the endothelium

(Tao et al., 2020), whether S2PNP-siEpsin1/2 prohibits endothelial Epsins to synergistically curb

atherosclerosis may require further investigation as deletion of endothelial Epsins also reduces

inflammation and atherogenesis (Dong et al., 2020; Dong et al., 2021). Interestingly, we did not

observe significant changes of the lipid profiles in the plasma from S2PNP-siCtrl and S2PNP-

siEpsin1/2 treated ApoE$^{-/-}$ mice, suggesting either a minor liver targeting by S2PNP-siEpsin1/2 or

that S2PNP-siEpsin1/2-mediated silencing of Epsins in liver could be inconsequential.

Nevertheless, whether S2PNP-siEpsin1/2 targets liver epsins warrants further investigation.

While autophagy can eliminate excess lipid droplet-associated cholesterol esters taken up by

macrophages (Evans et al., 2017; Le Guezennec et al., 2012; Ouimet et al., 2011; Sergin et al.,

2017), this process is attenuated during atheroma progression, leading to defective lipolysis,

impaired efferocytosis, and escalated inflammation, which increases the likelihood of vulnerable

lesion rupture (Butcher et al., 2011; Evans et al., 2017; Le Guezennec et al., 2012; Ouimet et al.,

2011; Purcell-Huynh et al., 1995; Razani et al., 2012; Sergin et al., 2017). A recent report suggests

that macrophage SR-B1 modulates autophagy through the VPS34 complex and PPARα

transcription of Tfeb in atherosclerosis (Tao et al., 2021). SR-B1 is a multifunctional membrane

receptor, which is not only responsible for selective uptake of HDL- derived cholesteryl esters into

cells, but also for transferring HDL-cholesterol efflux from peripheral tissues to back to liver (Van

Eck et al., 2004). Given that Epsins are implicated in autophagy function in *Drosophila* (Csikos et

al., 2009), the question of whether these proteins suppress autophagic activity by binding to SR-

B1 and inhibiting SR-B1-regulated function in macrophages remains unanswered.

Our studies also revealed that LXR-activated macrophage surface expression of ABCG1 was

significantly reduced with oxLDL treatment in WT, but not in DKO macrophages owing to their

internalization and degradation mediated by the Epsins (Fig. 6). It is thought that basal macrophage

ABCG1 is largely located at an intracellular location (Tarling and Edwards, 2011) and then

redistributed to the cell surface following LXR activation (Wang et al., 2006). Our immunostaining

and biotinylation studies (Fig. 6) are consistent with these observations. More importantly, staining

of ABCG1, in both human patient aortic arch and mouse aortic root sections, exhibits a reduction

in ABCG1 expression in severe atherosclerotic lesions (Fig. S11), suggesting a pivotal role of loss

of Epsins in maintaining the abundance of ABCG1 and limiting plaque buildup. Recent clinical

trials suggest that enhanced cholesterol efflux capacity (CEC) considerably reduces the risk of

repeat heart attacks and severe acute myocardial infarction (MI) (Keene et al., 2014; Nicholls et

al., 2018; Tardif et al., 2007). In addition, cholesterol efflux capacity has minimal links to various

risk factors and metabolic issues in contrast to HDL cholesterol level (Rohatgi et al., 2014). Our

results show that targeting Epsins augments cholesterol efflux (Fig. 5 and S16) and consequently,

may potentially enhance CEC, suggesting that inhibiting Epsins represents a promising new

strategy for treating patients suffering from recurrent MI and severe CAD.

In conclusion, our results provide a powerful proof-of-concept for the therapeutic potential of

Epsin siRNA-containing NPs to precisely target lesional macrophages to abolish inflammation and

resolve atheroma. By illustrating that targeting Epsins expression in macrophages restricts lipid

ingestion in foam cells and concomitantly enhances cholesterol efflux, we believe this study

provides a foundation for the renewed quest seeking innovative therapies that precisely resolve

lesional inflammation in advanced atherosclerosis.

Limitations of the study

In this study, we employed an originally designed macrophage-specific nanoparticle delivery

system to investigate the therapeutic prevention for atherosclerosis. A major technical limitation

is that mouse is not the ideal preclinical model to study atherosclerosis and plaque rupture as mouse

does not express CEPT and contains mainly circulating HDL vs LDL in humans. Larger animal

models such as pigs, rabbits and non-human primates more closely replicate atherosclerotic disease

conditions in humans. However, these experiments will require enormous resources to complete

as they demand the nanotherapy production in an industrial scale and the most appropriate large

animal model that requires years to establish. Most challengingly, critical reagents such as

commercially available antibodies may fail to recognize the antigens present in these large animals.

Despite effective lipid-lowering statin therapies and anti-PCSK9 agents, many patients exhibit

resistance to statin therapies and/or intolerance to anti-PCSK9 regime. Nevertheless, how the

efficacy of our nanotherapy in preventing the atherosclerotic plaque from transitioning to a

vulnerable one or promoting the regression of atherosclerosis is compared to that of statins and

anti-PCSK9 remains to be determined.

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STAR★METHODS

Detailed methods are provided in the online version of this paper.

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AUTHOR CONTRIBUTIONS: K.C. J.S., K.F.C. and H.C. conceived and designed the study. K.C. primarily contributed to the identification of the in vitro molecular mechanism. K. C. and B.W. primarily contributed to the in vivo data in atherosclerosis analysis. X.G., K.C. and K.F.C. conducted the RNA-seq data analysis and interpretation. H.W. and Y. D worked on part of the molecular mechanism investigation and provided biochemistry insights. Y.X. and X.J. synthesized, characterized the nanoparticles. M.M. performed the cholesterol and triglyceride analysis. S.C., Y.L, and B.Z. provided technical support in RNA-seq experiment. K.C., D.S. and Q.P. analyzed the data and provided comments. S.W. provided technical support with mouse genotyping and colony maintenance. K.C. and H.C. wrote the manuscript. K.C., D.B.C., K.L., S.S., M.F.L., J.S., K.F.C., and H.C. edited the manuscript. All the authors reviewed and provided feedback on the manuscript.

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Figure 1

Fig. 1. RNA-seq analysis of WT and DKO macrophages reveals that Epsins regulate lipid

cholesterol metabolism and efflux pathways. (**A**) A heatmap showing the expression of genes

involved in the cholesterol metabolic process (GO:0008203) and cholesterol efflux (GO:0033344).

(**B**) Gene Ontology (GO) enrichment analysis for up- and down-regulated genes in Epsin deficient

(DKO) macrophages relative to WT. (**C-E**) GSEA demonstrated the tendency of individual

pathways to be up- or down- regulated in Epsin deficient macrophages compared to wild type (top

panels). The bar plots (bottom panels) showing log2 fold change of altered genes in these pathways.

(**F**) Venn diagrams (top panels) showing the number of overlapping up- and down-regulated genes

in DKO and CD36 knockout (CD36KO) samples. Bar plots (bottom panels) showing the observed

numbers of overlapped genes versus numbers expected by random chance. The P-value was

calculated using two tail Fisher exact test. (**G**) Heatmap of expression values of up and down

regulated genes in DKO and CD36KO macrophages. Genes were grouped as indicated in the Venn

diagrams. WT, wild type for DKO; WT-Ctrl, wild type for CD36KO. (**H**) The Gene Ontology

(GO) enrichment analysis for shared down regulated (top) and up regulated genes (bottom)

between DKO and CD36KO macrophages. Benjamini corrected P-values are indicated on the x-

axis (B, H).

Figure 2

Fig. 2. Epsin facilitates CD36-mediated lipid uptake by promoting CD36 endocytosis and recycling. (**A-C**) Bone marrow derived macrophages (BMDM) or thioglycolate induced peritoneal macrophages from WT (n=5) and DKO (n=5) mice were incubated in lipid-deficient medium for 24h and treated with or without 100μg/mL oxLDL for 1h at 37^0C. qRT-PCR analysis of CD36 expression (A), western blot (WB) analysis for total protein level of CD36 (B) and flow cytometry for surface level of CD36 (C). NS, no significant difference; **WT vs DKO group, P<0.01; ##-oxLDL vs +oxLDL group, P<0.01. (**D-E**) Elicited WT and DKO macrophages were incubated in lipid-deficient medium for 24h and treated with or without 100μg/mL oxLDL for 15min (D) or 30min (E) at 37^0C. Macrophages were co-stained with CD36 (green), the early endosome marker EEA1 (red) or the recycling endosome marker Rab11 (Red) and DAPI (bule), and imaged using confocal microscope. White arrows indicate the endocytic vesicles, scale bar=5μm, ##-oxLDL vs +oxLDL group (n=8), P<0.01. (**F**) BODIPY staining of peritoneal macrophages pre-incubated with 25μg/mL oxLDL for 24h in lipid-deficient medium, **WT vs DKO group (n=6), P<0.01, scale bar=10μm. (**G**) Cholesterol and triglycerides levels in WT and DKO macrophages treated with 25μg/mL oxLDL for 24h in lipid-deficient medium (n=3). **-oxLDL (WT) vs +oxLDL (WT), P<0.01; #-oxLDL (DKO) vs +oxLDL (DKO), P<0.05; && +oxLDL (WT) vs +oxLDL (DKO), P<0.01. (**H**) Macrophages isolated from WT and DKO mice were incubated in lipid-deficient medium for 24h followed by the treatment with DiI-oxLDL for 2h at 37^0C to assess the lipoprotein uptake by flow cytometry, **WT vs DKO group (n=6), P<0.01. Data from A-H are presented as mean ± SD and were analyzed using either unpaired Student's t-test (two groups) or one-way ANOVA (multiple comparisons).

Figure 3

Fig. 3. Epsin interacts with CD36 via Epsin-ENTH domain which is critical for CD36-

mediated lipid uptake and foam cell formation. (**A**) BMDM or peritoneal macrophages isolated

from WT and DKO mice were incubated in lipid-deficient medium for 24h followed by the

treatment with 100μg/mL oxLDL for 1h, IP and WB analysis of Epsin1 and CD36 (n=3, **WT vs

DKO, P<0.01). (**B**) CD36 plasmids and full length (FLAG-Epsin1^{WT}) or domain-deletion

constructs (FLAG-Epsin1$^{\triangle ENTH}$ or FLAG-Epsin1$^{\triangle UIM}$) in the pcDNA3 vector were transfected

into HEK 293T cells for 48 h and then treated with 100μg/mL oxLDL for 1h, followed by

immunoprecipitation (IP) and WB analysis using antibodies against FLAG tags and CD36 (n=3,

Epsin1^{WT} vs vector group, P<0.01; $^{\#\#}$Epsin1$^{\triangle UIM}$ vs vector group, P<0.01). (C**) Peritoneal

macrophages isolated from WT mice were incubated in lipid-deficient medium for 24h followed

by treatment with 5 μM MG132 for 3h. Cells were subsequently treated with 100 μg/mL oxLDL

for 1h followed by IP and WB for ubiquitin and CD36. (**D**) FLAG-Epsin1^{WT}, FLAG-Epsin1$^{\triangle ENTH}$,

and FLAG-Epsin1$^{\triangle UIM}$ constructs were transfected into DKO macrophages for 48 h and treated

with 100μg/mL oxLDL for 1 h, followed by staining with F4/80 (red), BODIPY (green) and DAPI

(blue). Scale bar= 200μm. (**E**) Statistics for (D and Fig. S6), n=6, **Epsin1 ^{WT} vs vector group,

P<0.01; $^{\#\#}$Epsin1$^{\triangle UIM}$ vs vector group, P<0.01. Data from A-D are presented as mean ± SD and

were analyzed using either unpaired Student's t-test (two groups) or one-way ANOVA (multiple

comparisons).

Figure 4

Fig. 4. RNA-seq analyses of WT, DKO and ABCG1 knockout (ABCG1KO) in macrophages

indicate inversely regulation of lipid metabolism and inflammatory response. (**A-C**) The Gene

Set Enrichment Analysis (GSEA) (top panels) indicates the tendency of individual pathways to be

up or down regulated in ABCG1KO macrophages compared to wild type. Genes associated with

cytokine production involved in the inflammatory response (A), macrophage activation (B), and

negatively regulating macrophage derived foam cell differentiation (C) are analyzed. The Barplots

(bottom panels) showing log2 fold changes of expression of altered genes. (**D**) GO enrichment

analysis for up- and down- regulated genes in ABCG1KO relative to WT. (**E**) Genome browser

tracks to show expression of Itgb3 in individual samples. (**F**) The GO enrichment analysis revealed

pathways reversely regulated in ABCG1 knock out and Epsin deficient macrophages, compared

to wild type. *$P<0.05$.

Figure 5

In vitro Efflux

Fig. 5. Epsins deficiency in macrophages shows increased cholesterol efflux *in vitro* and reverse cholesterol transport (RCT) *in vivo*. (**A-B**) Peritoneal macrophages were isolated from WT, DKO) and DKO/ABCG1$^{fl/+}$ mice. *In vitro* [^{3}H]-cholesterol labeled WT, DKO or DKO/ABCG1$^{fl/+}$ macrophages cholesterol efflux to 25μg/mL HDL and 10μg/mL ApoA-1 in the presence of 3μmol/L LXR agonist T0901317 were determined (n=9). **WT vs DKO, P<0.01; $^{##}$DKO vs DKO/ABCG1$^{fl/+}$, P<0.01; $^{&&}$WT vs DKO/ABCG1$^{fl/+}$, P<0.01. (**C**) Schematic of [^{3}H]-cholesterol loaded macrophage-RCT pathway. WT, DKO or DKO/ABCG1$^{fl/+}$ macrophages were treated with 4μCi/mL [^{3}H]-cholesterol and 50μg/mL ac-LDL for 48h followed by the injection of radiolabeled foam cells to C57BL/6/WT mice. After 48h, blood, liver and feces were collected and measured using a scintillation counter. (**D-I**) Distribution of [^{3}H]-radioactivity counts in serum, HDL, liver feces and intestinal contents were determined by scintillation counter (n=6). **WT vs DKO, P<0.01; $^{##}$DKO vs DKO/ABCG1$^{fl/+}$, P<0.01. (**J**) LysM-DKO mice were crossed with ABCG1$^{fl/fl}$ mice to generate LysM-DKO-ABCG1$^{fl/+}$ mice. (**K-L**) Peritoneal macrophages isolated from WT, LysM-DKO and LysM-DKO/ABCG1$^{fl/+}$ mice (n=6) were analyzed by qRT-PCR (K) and WB (L) (n≥3). **WT vs DKO/ABCG1$^{fl/+}$ group, P<0.01; $^{##}$WT vs DKO group, P<0.01; $^{&&}$DKO vs DKO/ABCG1$^{fl/+}$ group, P<0.01. Data from A-L are presented as mean ± SD and were analyzed using one-way ANOVA (multiple comparisons).

Figure 6

Fig. 6. Epsins bind to ABCG1 and facilitate the internalization and degradation of ABCG1 via lysosomes. (**A**) Macrophages from WT (n=3) and DKO (n=3) mice were lysed for WB analysis (******WT vs DKO, P<0.01). (**B**) Macrophages from WT (n=3) and DKO (n=3) mice were pretreated with a liver X receptor (LXR) activator and followed by a cell surface biotinylation assay to

evaluate the cell surface ABCG1 levels (**WT vs DKO, P<0.01). (**C**) LXR activated WT and

DKO macrophages were incubated in lipid-deficient medium for 24h and treated with or without

100μg/mL oxLDL for 5, 15 and 45 min followed by staining with anti-ABCG1 and analyzed by

flow cytometry. (**D**) LXR pretreated macrophages isolated from WT and DKO mice were treated

with 100μg/mL oxLDL for 1h followed by IP and WB for Epsin1 and ABCG1 or ABCA1 (n=3,

WT vs DKO, P<0.01). (E**) ABCG1 plasmids and full length (FLAG-Epsin1^{WT}) or domain-

deletion constructs (FLAG-Epsin1$^{\triangle ENTH}$ or FLAG-Epsin1$^{\triangle UIM}$) in the pcDNA3 vector were

transfected into HEK 293T cells for 24 h in the presence of LXR agonist. Cells were then treated

with 100μg/mL oxLDL for 1h, followed by IP and WB analysis using antibodies against FLAG

tags and ABCG1 (n=3, **Epsin1 ^{WT} vs vector group, P<0.01; ## Epsin1$^{\triangle ENTH}$ vs vector group,

P<0.01). (**F**) Peritoneal macrophages isolated from WT mice were cultured in serum-free media

for 24h followed by treatment with 5 μM MG132 for 3h. Cells were then treated with 100μg/mL

oxLDL for 1h followed by IP and WB for ubiquitin and ABCG1. (**G-H**) WT and DKO

macrophages were incubated in lipid-deficient medium for 24h followed by incubation with or

without 100μg/mL oxLDL for 15min (**G**) or 45min (**H**) at 37^{0}C. Macrophages were stained with

ABCG1 (green), early endosome marker EEA1 (red) or lysosome marker Lamp1 (red) and DAPI

(blue), then assessed by confocal microscopy. White arrows indicate the endocytic vesicles, scale

bar=5μm, ##-oxLDL vs +oxLDL group (n=8), P<0.01. Data from A-H are presented as mean ± SD

and were analyzed using either an unpaired Student's t-test (two groups) or one-way ANOVA

(multiple comparisons).

Figure 7

Fig. 7. S2PNP-siEpsin1/2 delivery inhibits atheroma progression, decreases necrotic core

content, and increases smooth muscle cell content in advanced stage of atherosclerosis. (**A**)

ApoE$^{-/-}$ mice fed a Western Diet (WD) for 17 weeks followed by treatment of S2PNP-siCtrl or

S2PNP-siEpsin1/2 for 3 weeks (2 doses per week). (**B**) *En face* ORO staining of aortas from

baseline, control siRNA NP-treated ApoE$^{-/-}$ or Epsin1/2 siRNA NP treated ApoE$^{-/-}$ mice fed a WD.

lesion areas were analyzed with NIH ImageJ, scale bar=5mm. (**C**) ORO staining of

brachiocephalic artery (BCA) and aortic root sections of above three groups. Lesional area (black

dash line outlined) were analyzed by NIH ImageJ. (**D**) Aortic roots from S2PNP-siCtrl-treated

ApoE$^{-/-}$ or S2PNP-siEpsin1/2 treated ApoE$^{-/-}$ mice were stained with the macrophage marker CD68

(dashed white line outlined) and αSMA (white arrow). (**E**) H&E staining of BCA and aortic root

sections of the above three groups. Necrotic areas (black dash line outlined) were analyzed by NIH

ImageJ. Data from B-E (n=6) are presented as mean ± SD and were analyzed using one-way

ANOVA. $^{\&\&}$S2PNP-siCtrl vs baseline, P<0.01; $^{\#\#}$S2PNP-siCtrl vs S2PNP-siEpsin1/2 group,

P<0.01, scale bar: B=5mm; C, D, E=500μm.

Figure 8

A AAV8-PCSK9-mice 16 weeks on WD | S2PNP-siCtrl or S2PNP-siEpsin1/2 Administration on ND

Baseline · week4

B

ORO staining

Before NP Injection · S2PNP-siCtrl · S2PNP-siEpsin1/2

Aorta

Aortic Root

C CD68 · αSMA · DAPI

Before NP Injection

S2PNP-siCtrl

S2PNP-siEpsin1/2

D

Lesion area of (% of aorta) — Before, siCtrl NPs, siEpsin1/2 NPs — NS, **, ##

Lesion area of aortic root (%) — Before, siCtrl NPs, siEpsin1/2 NPs — NS, **, ##

Fold Change of CD68 MFI — Before, siCtrl NPs, siEpsin1/2 NPs — NS, **, ##

Fold Change of Lumenal αSMA MFI — Before, siCtrl NPs, siEpsin1/2 NPs — &&, **, ##

E VCAM-1 · CD31 · DAPI · Merged

S2PNP-siCtrl

S2PNP-siEpsin1/2

F ICAM-1 · CD31 · DAPI · Merged

S2PNP-siCtrl

S2PNP-siEpsin1/2

G P-Selectin · CD31 · DAPI · Merged

S2PNP-siCtrl

S2PNP-siEpsin1/2

H E-Selectin · CD31 · DAPI · Merged

S2PNP-siCtrl

S2PNP-siEpsin1/2

I

% of VCAM-1 fluorescence area in EC — siCtrl NPs, siEpsin1/2 NPs — **

% of ICAM-1 fluorescence area in EC — siCtrl NPs, siEpsin1/2 NPs — **

% of P-selectin fluorescence area in EC — siCtrl NPs, siEpsin1/2 NPs — **

% of E-selectin fluorescence area in EC — siCtrl NPs, siEpsin1/2 NPs — **

J

Fold change of mRNA expression

◇ S2PNP-siCtrl
△ S2PNP-siEpsin1/2

IL-6 (**), IL-1β (**), TNF-a (**), MCP-1 (NS), iNOS (**), IL-10 (**), Arg-1 (**), Epsin1 (**), Epsin2 (**)

Pro-inflammatory cytokines | Anti-inflammatory cytokines

Fig. 8. S2PNP-siEpsin1/2 promotes the resolution of atheroma, reduces inflammation, and stabilizes atherosclerotic plaques. (**A**) C57BL/6 WT mice were injected twice with PCSK9-AAV8 (D377Y) virus and fed a WD for 16 weeks and followed by normal diet feeding with the treatment of S2PNP-siCtrl or S2PNP-siEpsin1/2 for 4 weeks (2 doses per week). (**B**) *En face* ORO staining of aortas from above mice. Lesion area was analyzed using NIH ImageJ, scale bar=5mm. (**C**) Immunostaining of CD68 (green) and αSMA (red) in the above groups. White arrows indicate the luminal αSMA. For (B) and (C), n=6, scale bar: B (aorta)=5mm, B (aortic root)=500μm, C=500μm. (**D**) Statistics for ORO staining (B) and IF staining (C), **S2PNP-siEpsin1/2 vs baseline, $P<0.01$, [##]S2PNP-siCtrl vs S2PNP-siEpsin1/2 group, $P<0.01$. (**E-H**) Co-staining of CD31 (endothelial cell marker, green) with vascular cell adhesion molecule-1 (VCAM-1, red, E), intercellular adhesion molecule-1 (ICAM-1, red, F), P-selectin (red, G) or E-selectin (red, H) and DAPI on the luminal surface of aortic root sections. White arrows indicate CD31/ICAM-1, CD31/VCAM-1, CD31/E-selectin or CD31/P-selectin colocalization. Scale bars=20μm. (**I**) Statistical analysis of E-H, n=6, **S2PNP-siCtrl vs S2PNP-siEpsin1/2 group, $P<0.01$. (**J**) Isolated macrophages from PCSK9-mice were treated with S2PNP-siCtrl or S2PNP-siEpsin1/2 for 24h, RNA was isolated, and qRT-PCR was performed (n=3, **S2PNP-siCtrl vs S2PNP-siEpsin1/2 group, $P<0.01$). B-J are presented as mean ± SD and were analyzed using one-way ANOVA (B and C) and the unpaired Student's t-test (E-J).

Online Supplementary Materials

Targeting Epsins by nanotherapy regulates lipid metabolism and promotes

ABCG1-mediated cholesterol efflux to fortify atheroma regression

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<u>The supplementary materials include:</u>

Materials and Methods

Fig. S1. Differentially expressed genes between WT and DKO macrophages.

Fig. S2. Representative shared differentially expressed genes in DKO and CD36 knock out macrophage.

Fig. S3. Foam cell genes are downregulated in Epsin-deficient macrophages.

Fig. S4. Gating strategy used in the flow cytometric evaluation for Fig. 2C and 2H.

Fig. S5. The loss of Epsins reduced oxLDL uptake by macrophages.

Fig. S6. Transfection of full-length Epsin1 and constructs with the ENTH and UIM domains

deleted into WT macrophages did not affect lipid uptake.

Fig. S7. Differentially expressed genes between WT and ABCG1 knockout (ABCG1KO)

macrophages.

Fig. S8. Schematic of the quantification for radiolabeled cholesterol.

Fig. S9. Gene expression levels of indicated gene in WT and DKO macrophage.

Fig. S10. Gating strategy used in the flow cytometric evaluation for Fig. 6C.

Fig. S11. The expression of ABCG1 decreased with atherosclerotic progress in humans and mice.

Fig. S12. Characterization and silencing efficacy of S2P-conjugated siEpsin1/2 NPs.

Fig. S13. S2PNP-siEpsin1/2 treated macrophages show reduced foam cell formation.

Fig. S14. S2PNP-siEpsin1/2 inhibits lesion formation and macrophage accumulation in early stage

of atherosclerosis.

Fig. S15. Silencing lesional macrophage Epsin1/2 by S2PNP-siEpsin1/2 NP-treatment stabilized

plaques in a progression model of atherosclerosis.

Fig. S16. Delivery of S2PNP-siEpsin1/2 does not change cholesterol and triglyceride levels of

ApoE$^{-/-}$ mice fed a WD.

Fig. S17. Silencing macrophage Epsin1/2 by S2PNP-siEpsin1/2 NPs reduces lesion size in a

regression model of atherosclerosis.

Fig. S18. Summary schematic diagram of the study.

Table S1. List of reagents and animal models.

Data file S1. Differentially expressed genes in DKO compared to wild type.

Data file S2. Gene Ontology enrichment analysis for DEGs in DKO compared to wild type.

Data file S3. Gene expression data for heatmap showing overlapping between DKO and CD36KO.

Data file S4. Gene Ontology enrichment analysis for DEGs shared by DKO and CD36KO.

Data file S5. Gene differential expression analysis between foam and macrophage cells.

Data file S6. Gene differential expression analysis between ABCG1KO and wild type

macrophages.

Data file S7. Gene Ontology enrichment analysis for DEGs in ABCG1KO compared to wild type.

Data file S8. Gene Ontology enrichment analysis for pathways reversely regulated by ABCG1KO

and DKO.

Data file S9. Uncropped Western Blot.

Data file S10. Primary data of statistical analysis.

Materials and Methods

Methods, reagents, and antibodies

Parts of the methods and materials are available in the Supplementary Materials. Antibodies, primers, and reagents are listed in Supplementary Table S1.

Animal models

In this study, all animal procedures were performed in compliance with institutional guidelines and mouse protocols were approved by the Institutional Animal Care and Use Committee (IACUC) of Boston Children's Hospital, MA, USA. Both male and female mice were used. C57BL/6 mice (stock #00664), ApoE$^{-/-}$ mice (stock #008525), LysM-Cre deleter mice (stock #004781), and ABCG1^{flox} mice (C57BL/6-Abcg1^{tm1Ched}/J, stock #027954) were purchased from Jackson Research Laboratory. As double knockout of Epsins 1 and 2 in mice lead to embryonic lethality, we generated Epsin1$^{fl/fl}$;Epsin2$^{-/-}$ mice. These mice were subsequently combined with LysM-Cre deleter mouse strains to create myeloid-specific Epsins deficient (LysM-DKO) mice and bred them to the C57BL/6 background (Brophy et al., 2019). As proper controls, we also generated wild type C57BL/6 mice bearing LysM Cre. These mice only have one copy of LysM Cre as homozygous LysM Cre mice are susceptible to atherosclerosis. Furthermore, these mice were crossed to the ApoE$^{-/-}$ (C57BL/6) background to obtain ApoE$^{-/-}$/WT and ApoE$^{-/-}$/LysM-DKO mice (Brophy et al., 2019). We used macrophages from WT and LysM-DKO on either normal background or ApoE$^{-/-}$ background. We have not seen significant differences in the results with these backgrounds. ***For simplicity, we referred to the macrophages from WT or ApoE$^{-/-}$/WT as WT macrophages and macrophage from LysM-DKO and AopE$^{-/-}$/LysM-DKO as DKO macrophages.*** We used these mice (male and female) and primary macrophages (peritoneal and bone marrow derived) isolated from them for this study.

In addition, to generate myeloid-specific ABCG1-KO mice, we crossed the LysM-cre$^+$ mice

with ABCG1$^{fl/fl}$ mice. We then bred the obtained LysM-cre$^+$; ABCG1$^{fl/fl}$ mice with ApoE$^{-/-}$ mice

and backcrossed them on to the C57BL/6 background.

To induce atherosclerosis, mice were fed Western diet (WD, Protein 17% kcal, Fat 40% kcal,

Carbohydrate 43% kcal; D12079B, Research Diets, New Brunswick, USA) starting at the age of

6-8 weeks for 8-20 weeks. Mice were sacrificed at different time points based on the experimental

design and peritoneal macrophages, blood, heart, aorta and bone marrow monocytes were

harvested. For control mice, in addition to ApoE$^{-/-}$;Epsin1$^{+/+}$;Epsin2$^{+/+}$ mice, we also used ApoE$^{-/-}$

;Epsin1$^{+/+}$;Epsin2$^{+/+}$ mice with a single copy of LysM-cre, and ApoE$^{-/-}$;Epsin1$^{fl/fl}$;Epsin2$^{-/-}$

littermates lacking the single copy of LysM-cre. To simplify the terminology, we refer to these

control mice as ApoE$^{-/-}$, as results were not different in any of the analyses we performed. For the

study of atheroma resolution, WT mice (both male and female) at the age of 8 weeks were

intravenously injected with 2×10^{11} genomes of PCSK9 adeno-associated virus (rAAV8-D377Y-

mPCSK9 purchased from Boston Children's Hospital Viral Core Facility) followed by 17 weeks

of WD feeding. For each experimental model and time point, 6-10 mice were analyzed and both

male and female mice were used in separate groups.

Human samples

Human healthy control (n=3) and diseased aortic arch samples (n=3) from atherosclerosis

patients were purchased from Maine Medical Center Biobank. The medical information of the

atherosclerotic patient samples is in Data file S10. The paraffin sections were de-paraffinized and

performed antigen retrieval to unmask the antigenic epitope with 10mM Sodium Citrate, pH 6.0,

with 0.5% Tween 20 at 90°C for 10 minutes. Immunofluorescence staining of the slides was

performed with the standard protocol described below.

Isolation of primary mouse macrophage and macrophage culture

The isolation of peritoneal macrophages was performed as described previously (Cui et al., 2019). Briefly, mice were intraperitoneally injected with 1mL of 4% thioglycolate (TG), and 3 days post-injection, mice were sacrificed, and peritoneal cells were harvested with 7mL of sterile PBS by lavage of peritoneal cavity. Cells were spun down (1000xg, 5 minutes), washed with PBS, resuspended, and plated in RPMI (containing 10% FBS and 1% PennStrep) at 37 °C in humidified air containing 5% CO_2 atmosphere. After 3 hours, non-macrophages were washed with PBS. For bone marrow-derived macrophages, mice were sacrificed, and both femurs and tibias were dissected and flushed with sterile 1X PBS, followed by passing through a 70μM cell strainer. Cells were spun down (1000xg, 5 minutes), washed with PBS, and seeded in RPMI (containing 10% FBS and 1% PennStrep) with macrophage colony stimulating factor (M-CSF, 10ng/mL) to differentiate into macrophages for 5 days. After which, the macrophages were harvested and used in experiments. Both bone marrow-derived and isolated peritoneal primary macrophages were used to confirm knock out of Epsin1 and Epsin2. Isolated peritoneal macrophages were mainly used for western blots, flow cytometry and immunoprecipitations due to higher yields.

RNA isolation, quantitative real-time PCR and RNA sequencing

Total RNA was extracted from primary macrophages with Qiagen RNeasy Mini Kit based on manufacturer's instruction including the optional step to eliminate genomic DNA. The extracted RNA was either used for qRT-PCR or RNA sequencing according to the experimental designs.

For qRT-PCR, mRNA was reverse transcribed to cDNA with the iScript cDNA Synthesis Kit (Bio-Rad Laboratories, Inc., Hercules, CA, United States). 2 μl of the product was subjected to qRT-PCR in StepOnePlus Real-Time PCR System (Applied Biosystems) using SYBR Green PCR

Master Mix reagent as the detector. PCR amplification was performed in triplicate on 96-well

optical reaction plates and replicated in at least three independent experiments. The ΔΔCt method

was used to analyze qPCR data. The Ct of β-actin cDNA was used to normalize all samples.

Primers are listed in Supplementary Table S1. For RNA sequencing, extracted RNA from primary

macrophages with Qiagen RNeasy Mini Kit based on manufacturer's instruction were sent to BGI

Genomics Company (San Jose, USA) for RNA sequencing.

RNA sequencing data processing and differential expression analysis

The raw reads of RNA sequencing data were mapped to the mouse genome (version mm10)

using STAR (version 2.7.9a) (Dobin et al., 2013) or TopHat (version v2.1.1) (Kim et al., 2013).

The read count was calculated for each gene by htseq-count (version 0.11.2) (Anders et al., 2015)

and further normalized to TPM (transcripts per million) and FPKM (fragments per kilobase of

transcript per million fragments mapped). For differential expression analysis of Epsin deficient

and wild type macrophage dataset, the read count matrix produced by htseq-count was imported

into the R package DESeq2 (version 1.30.1) (Love et al., 2014). For the ABCG1 knock out dataset,

we first performed a batch effect removal on the log10 transformed TPM expression matrix using

ComBat in the R package sva (version 3.38.0) (Johnson et al., 2007). Then, the R package limma

was used to do differential expression analysis for the batch effect removed expression matrix.

Genes with fold change larger than 1.2-fold and p-value less than 0.05 were identified as

differentially expressed genes (DEGs). Principal component analysis (PCA) was conducted by the

plotPCA function of DESeq2. Heatmap of gene expression values was generated using the R

package pheatmap (version 1.0.12). Gene Ontology (GO) functional enrichment analysis was

performed by the R package clusterProfiler (version 3.18.1) (Yu et al., 2012).

For the comparison of DEGs between DKO and CD36 knockout macrophages in mice, we

utilized the published bulk RNA-seq data from Chen et. al. (Chen et al., 2019), with the accession

number GSE139439, downloaded from NCBI GEO database (Edgar et al., 2002). The overlapping

DEGs co-regulated in DKO and CD36 knockout macrophages were analyzed by the R package

VennDiagram (version 1.6.20) (Chen and Boutros, 2011). The statistical significance of

overlapping genes was calculated by Fisher exact test.

Foam cell and macrophage bulk RNA-Seq data is from the publicly available dataset

GSE116271 reported by Kim et. al. (Kim et al., 2018). Foam and non-foam cell RNA-Seq data

was mapped onto mouse mm10 genome using Tophat2 (version v2.1.1) (Kim et al., 2013). Read

counts were assigned to genes by htseq-count. Gene expression levels were calculated by the R

package edgeR (version 3.32.1) (Robinson et al., 2010). Gene set enrichment analysis (GSEA)

(Mootha et al., 2003; Subramanian et al., 2005) was used to investigate if the DEGs in DKO show

statistically significant differences between foam cells and macrophages. All the data are available

in Data files (S1-S8).

Cell culture and plasmids transfection

The HEK 293T cell line (ATCC no. CRL-11268) were used for plasmid transfection to map

the binding sites of Epsin to CD36 or ABCG1. Flag-tagged Epsin1^{WT}, Epsin1$^{\Delta UIM}$, Epsin1$^{\Delta ENTH}$

truncation constructs, and pcDNA vector were prepared previously in our lab(Dong et al., 2020).

CD36 (lot:52025) and ABCG1 (lot:53952) plasmids were purchased from Addgene. HEK 293T

cells were cultured in DMEM (10% FBS and 1% PennStrep) at 37°C in humidified air containing

5% CO_2 atmosphere and transfected using Lipofectamine 2000 as instructed by the manufacturer.

Transfection of Epsin domains to macrophage: Isolated WT and DKO peritoneal macrophages

were cultured in RPMI media (containing 10% lipid-depleted serum and 1% PennStrep).

Epsin1^{WT}, Epsin1$^{\Delta UIM}$, Epsin1$^{\Delta ENTH}$ truncation constructs, and pcDNA vector were transfected to

macrophages using lipofectamine LTX transfection reagent or using Nucleofector II apparatus

(Amaxa, Germany) with mouse macrophage nucleofector kit (Lot: VPA-1009, Lonza) as instructed

by the manufacturer.

Immunoprecipitation (IP) and western blotting (WB)

For total protein levels, primary macrophages were washed with ice cold PBS, lysed in RIPA

buffer (50 mM Tris HCl, 150 mM NaCl, 1.0% NP-40, 0.5% Sodium Deoxycholate, 1.0 mM

EDTA, 0.1% SDS and 0.01% sodium azide at a pH of 7.4.), added 4X Laemmli buffer (1:3 dilution

in lysis buffer) was added and WB was perfomed for the proteins indicated in this study. For IP,

cells were washed with ice cold PBS, lysed with lysis buffer (1% Triton X-100, 5mM Na_3VO_4,

10mM N-ethylmaleimide, and protease inhibitor cocktail), spun down (12000xg, 5 min at 4°C) to

remove the debris. Cell lysates were pre-cleared with appropriate species of IgG and protein A/G

Sepharose beads for 1h at 4°C with rotation followed by incubation with A/G Sepharose beads and

indicated antibodies for 12 hours at 4°C with rotation. For negative controls, equal concentrations

of mouse IgG were added instead of specific antibodies. Precipitated proteins were washed with

ice cold lysis buffer for 3 time and eluted from protein A/G beads using 2X Laemmli buffer (1:1

in lysis buffer) followed by WB as described previously (Brophy et al., 2019). WB were repeated

for at least 3 times with different mice and bands were quantified using NIH ImageJ software. The

protein expression levels were normalized to GAPDH levels. For IPs in macrophages involving

oxLDL treatment, cells were pre-treated with 1 μM MG132 in serum-free media for 4 hours,

followed by the treatment with or without oxLDL (100μg/ml) for 30 minutes at 37°C and

processed for immunoprecipitation. For the transfection of Epsin1 constructs and CD36 or ABCG1

constructs, transfected HEK 293T cells were cultured in lipid-depleted DMEM media for 24 hours

followed by stimulation with 100μg/mL oxLDL for 30 minutes at 37°C and performed for

immunoprecipitation.

Atherosclerosis analysis

Mice were anesthetized with isoflurane. Blood was collected from the right atrium followed

by left ventricle perfusion with cold PBS. Whole aortas, brachiocephalic artery (BCA) and hearts

of the mice were isolated. Whole aortas were dissected symmetrically, pinned to parafilm and

fixed in 4% PFA to allow the *en face* analysis. Heart and BCA were embedded in OCT mounting

medium and immediately frozen. The aortic sinus and BCA in the heart were sectioned at 10

microns (at least 9 sections of each sample were collected). The internal elastic lamina and luminal

boundary of the lesion was manually traced and the lesion sizes of the *en face* aortas and aortic

roots were quantified by NIH ImageJ software. The methods for Oil red O (ORO) staining,

immunofluorescent (IF) staining, Hematoxylin and Eosin (H&E) staining, and Van Gieson's

staining are described in supplementary materials (Brophy et al., 2019).

Oil Red O (ORO) staining and immunofluorescent (IF) staining of primary macrophages or

cryosections were performed as described below. Oil Red O imaging was taken by a Zeiss Axio

Scope.A1, AxioCam ICc5, and analyzed by ZEN-Lite 2012 software. Imaging of *en face* aortas

was performed using a Nikon SMZ1500 stereomicroscope, SPOT Insight 2Mp Firewire digital

camera, and SPOT Software 5.1. Imaging of IF staining was taken by Zeiss confocal microscope

and quantification areas were performed by manually tracing the aortas, BCA, and aortic root

lesion areas with NIH ImageJ software. Statistical analysis of samples including Oil Red O, Van

Gieson, H and E, and IF staining were performed by blinding in which each animal was assigned

a number and data was collected based on the assigned number with genotype and experimental

condition unknown to the data collector.

Oil Red O staining. For cryostat sections: cryostat sections 10 microns were fixed in 4%

paraformaldehyde. Slides were washed with PBS (3 times, 5min each time), and rinsed with 100%

propylene glycol followed by staining with freshly prepared 0.5% Oil Red O solution for 10

minutes at 60°C. Slides were then put in 85% propylene glycol for 2 minutes, followed by 3 washes

in water. Slides were next incubated with hematoxylin for 1-2 min, rinsed 3 times in water, and

mounted with aqueous mounting media. For foam cells: coverslips were washed with PBS, fixed

in 4% paraformaldehyde for 10 minutes and stained with freshly prepared 0.5% Oil Red O solution

for 10 minutes at 65°C. Slides were then washed in PBS (3 times, 5min each time), incubated with

hematoxylin for 1min, washed with PBS 3 times, and mounted on coverslips with aqueous

mounting media. Imaging was processed with a Zeiss LSM880 confocal microscope and analyzed

with ZEN-Lite 2012 software and HIH ImageJ software. Quantification of lesion was performed

as described above. Quantification of foam cells was performed as described below.

Hematoxylin and Eosin (H&E) staining. Frozen aortic root and BCA sections: slides were

fixed in 10% buffered formalin for 15 minutes and washed in water. Next, slides were stained with

0.1% hematoxylin for 3min followed by ddH$_2$O washes, 95% ethyl alcohol and water. Slides were

then dipped in 0.5% Eosin for 3 min, quickly rinsed with ddH$_2$O, dipped in 95% and 100% ethanol,

incubated in 50:50 Xylenes:100% ethanol and incubated in 100% Xylenes. Slides were mounted

using Permount with coverslips.

Van Gieson's staining. Sections were fixed in 10% buffered formalin for 15 minutes and

washed in water. Slides were stained with hematoxylin for 10 min, washed in ddH$_2$O, stained 1-3

min in Van Gieson's solution, dehydrated in 95% alcohol and 100% alcohol two times. Then,

slides were cleared in xylene for two times and mounted with Permount. Staining results were

presented as: Elastic fibers and nuclei–Black, Collagen fibers–Red and Other tissue elements–

Yellow. Lesion area was traced using NIH ImageJ software. The percentage of necrotic area was

determined by necrotic areas within the lesion. Collagen content was determined by the percentage

of lesion areas.

Immunofluorescent staining. Human samples: human healthy and atherosclerotic aorta

paraffin sections were deparaffinized in xylene for 15min, immersed in graded ethanol (100%,

100%, 95%, 90%, 80%, and 70%, each for 3 min), washed with running tap water and processed

antigen retrieval with 10mM Sodium Citrate, pH 6.0, with 0.05% Tween 20 at 90°C for 10 minutes.

Samples were blocked in PBS with 3% donkey serum, 3% BSA, and 0.3% Triton X-100 and

incubated with primary antibodies ABCG1 or CD68 (1:70 dilution) at 4°C overnight. The sections

were washed three times and respective secondary antibodies conjugated to fluorescent labels

(Alexa Flour 594, 488, or 647; 1:200 to 1:500) were added for 2 h at room temperature. The

sections were mounted with mounting media containing DAPI (1:100).

Mouse aortic root and BCA cryosections: Sections were fixed by 4% paraformaldehyde for 30

min at room temperature and blocked in PBS solution containing 3% donkey and/or goat serum,

3% BSA, and 0.3% Triton X-100 for 1hour. Samples were then incubated with primary antibody

at 4°C overnight, followed by incubation with the respective secondary antibodies conjugated to

fluorescent labels (Alexa Flour 594, 488, or 647; 1:200 to 1:500) for 2 hours at room temperature.

The sections were mounted with mounting media containing DAPI (1:100).

Staining of peritoneal macrophages: macrophages plated on the 18-mm coverslips were

washed with PBS, fixed by 4% paraformaldehyde for 15 min at room temperature and blocked in

PBS solution containing 3% donkey and/or goat serum, 3% BSA, and 0.3% Triton X-100 for 1hour.

Coverslips were then incubated with primary antibody (CD36, ABCG1, EEA1, Rab11, or Lamp1;

1:100-1:300) at 4°C overnight, followed by incubation with the respective secondary antibodies

conjugated to fluorescent labels (Alexa Flour 594, 488, or 647; 1:200 to 1:500) for 1 hour at room temperature. The sections were mounted with mounting media containing DAPI (1:100). BODIPY^{TM} 493/503 staining of macrophages was performed following F4/80-fluorescent conjugated antibody incubation for 2 hours at room temperature (Spangenburg et al., 2011). Slides were washed with PBS, stained with DAPI and mounted. Immunofluorescent images were captured using a Zeiss LSM880 confocal microscope and analyzed with ZEN-Lite 2012 software and HIH ImageJ software. Samples stained without the primary antibody were obtained using the same settings as negative controls. Mean fluorescence intensity (MFI) of antibody staining was determined via NIH ImageJ software with n=3 or more.

Flow cytometry assay

Flow cytometry of elicited primary macrophages: peritoneal macrophages from WT and DKO mice were isolated as described above and plated in 6 well plates in lipid-deficient medium for 24 hours followed by the treatment with or without 100μg/mL oxLDL for 1h at 37^{0}C. Macrophages were washed with 1XPBS, dissociated with 1mL non-enzymatic cell dissociation buffer, centrifuged (300xg, 5 minutes), and resuspended in 100μl FACS buffer (1X PBS, 2% FBS, 2mM EDTA) containing the following: FcR Blocking Reagent, fluorochrome conjugated anti-F4/80, primary antibodies against CD36 or ABCG1. Cells were incubated with the primary antibodies (1:100) on ice for 30min, washed with 100μl FACS buffer, spun down and resuspended with 100μl FACS buffer containing the fluorescent secondary antibodies (1:100). After 30 min, cells were washed with FACS buffer, fixed with 4% paraformaldehyde (PFA), and resuspended in FACS buffer for analysis. Single color and no color controls were prepared using elicited macrophages, which were treated the same as experimental groups. Expression of cell markers was analyzed using a FlowJo version 10 software. Gating strategies were performed as described in

Supplementary Figures S4 and S10. Flow cytometry of DiI-oxLDL treated macrophages:

peritoneal macrophages elicited from WT and DKO mice were incubated in lipid-deficient

medium for 24 hours followed by the treatment of DiI-oxLDL for 2h at 37^0C and macrophages

were washed with 1XPBS, dissociated with 1mL non-enzymatic cell dissociation buffer,

centrifuged (300xg, 5 minutes), resuspended in 100µl FACS buffer (1X PBS, 2% FBS, 2mM

EDTA) containing the following: FcR Blocking Reagent, fluorochrome conjugated anti-F4/80

antibody staining, fixed and assessed the uptake of lipoproteins by flow cytometry as described

above.

Foam cell formation

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TG (4%) induced peritoneal macrophages were isolated and plated on 18mm glass coverslips.

Cells were cultured in RPM media (containing 10% lipid-depleted serum and 1% PennStrep) for

24 hours and then treated with 10-100 µg/mL oxLDL for 24 hours (Brophy et al., 2019). Cells

were fixed in 4% PFA for 10 minutes at room temperature and washed with PBS. For Oil Red O

staining, coverslips were stained with Oil Red O, washed with PBS, counterstained with

hematoxylin, washed with PBS, and then mounted on slides. For Bodipy staining, coverslips were

immunofluorescently stained BodipyTM 493/503 and phalloidin-iFluor 555 reagent for 1 hour at

37°C, counterstaining with DAPI, and mounting on slides. Negative controls were not treated with

oxLDL. Foam cells were determined as the number of lipid positive cells (Oil Red O positive or

Bodipy positive) as a percentage of total cells. At least 6 fields per cover slip and 6 mice per

genotype were used for quantification.

Cell surface biotinylation

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Cell surface biotinylation was performed as described previously (Brophy et al., 2019). Isolated

peritoneal macrophages in the plate were washed with cold PBS, suspended at a concentration of

25×10^6 cells/mL and treated with 2mM EZ-Link Sulfo-NHS-LC-Biotin reagent on ice for 30

minutes followed by 3 washes with 100mM Glycine to remove excess biotin and then 3 washes

with cold PBS (5min each time). Cells were lysed and pulled down by streptavidin bead: cell

lysates were incubated with neutravidin beads for at least 12 hours at 4°C with rotation, and

proteins were eluted from beads using 4X Laemmli buffer diluted 1:3 in lysis buffer. Cell surface

biotinylated proteins were analyzed by western blotting and quantified using NIH Image J

software.

Plasma collection, triglyceride, and cholesterol analysis

For each mouse, 1mL syringe were rinsed with 1mL 0.5M EDTA to coat the inside of the

syringe with EDTA to prevent clotting during blood collection. Blood was collected from the right

atrium of the mouse heart after sacrifice with isoflurane and added to each 1.7mL tube containing

50µl 0.5M EDTA. Blood was centrifuged at 2000xg for 10 minutes at 4°C. Plasma was transferred

to a new tube and stored at -20°C. Plasma cholesterol and triglyceride levels were determined as

described below.

Total cholesterol, high-density lipoprotein (HDL) cholesterol and triglycerides in mouse serum

were determined on Ace Axcel® Clinical Chemistry System (Alfa Wassermann, West Caldwell,

NJ). Non-HDL cholesterol is calculated as Total Cholesterol – HDL and gives a measure of the

cholesterol carried by all of the atherogenic lipoproteins.

Quantification of total cholesterol, HDL and triglycerides in macrophages. Lipids were

extracted from macrophages with hexane:isopropanol (3:2, v:v) as described in Robinet et al

(Robinet et al., 2010). Solvents were removed by drying with nitrogen gas. Extracts were

resolubilized in 5% bovine serum solution by bath sonication (10 minutes at 37°C), freeze/thaw

treatment (1 hour at -80°C) and followed by probe sonication for 10 seconds. Reconstituted

samples were analyzed on Ace Axcel® Clinical Chemistry System for total cholesterol, HDL and

triglycerides as described above for measurements in mouse serum. Obtained values were

normalized to total protein measured in the cell lysates by Bradford Protein Assay (Bio-Rad).

Macrophage cholesterol efflux assay

Thioglycolate induced peritoneal macrophages from WT, DKO and DKO/ABCG1^{fl/+} mice

were plated in RPMI medium for 2-4 hours. Non-adherent cells were removed by washing with

PBS and cells were incubated with radiolabeled medium supplemented with 4 µCi/mL of [³H]-

cholesterol (Perkin-Elmer, Waltham, MA, USA), 5% FBS,1% P/S and 50µg/mL acetyl-LDL for

24 hours. Macrophages were washed twice with warm PBS and incubated with serum-free RPMI

1640 medium supplemented with 0.2% BSA, 2µg/mL acyl-CoA cholesterol acyltransferase

(ACAT) inhibitor and 4µmol/L LXR agonist T0901317 for 18 hours equilibration (Wang et al.,

2006). After this equilibration period, cells were washed twice with warm PBS and incubated in

serum free RPMI medium supplemented with cholesterol acceptors (10 µg/mL ApoA-1 or 25

µg/mL HDL) and 2µg/mL ACAT inhibitor for 4 hours (Sankaranarayanan et al., 2011). At the end

of the incubation, the efflux media was collected and filtered through a 0.45-µm filter to remove

the detached cells. Then, transfer the efflux medium was transferred to a scintillation vial. The

macrophages in the plates were added to 500 µl of 0.2N NaOH and incubated on shaker at 4 °C

overnight. Cell extract from each well was transferred to a scintillation vial. 4 mL of scintillation

liquid were added to each scintillation vial and radioactivity was measured by liquid-scintillation

counting (Escola-Gil et al., 2015). The cholesterol efflux to acceptors was expressed as a

percentage of total cholesterol using the following formula: % cholesterol efflux = (medium [³H]-

radioactivity [cpm]) / [(medium [³H]-radioactivity [cpm] + [³H]-radioactivity from cell extract

[cpm])] x 100, where cpm = counts per minute.

1269   Reverse cholesterol transport (RCT) assay

In vivo RCT experiment is based on the method detailed by Joan Carles Escolà-Gil et al

(Escola-Gil et al., 2015). Briefly, macrophages were radiolabeled with [^{3}H]-cholesterol (5 µCi/mL)

in 10% lipoprotein-depleted serum, 1% P/S and 50µg/mL acetyl-LDL RPMI media for 48h. Foam

cells were washed with serum-free media supplemented with 0.2% BSA and equilibrated for 4h

(37 °C, 5 % CO_2). Then, [^{3}H]-cholesterol-labeled macrophages were detached, spun down and

resuspended in PBS. The injection dose was 0.5 mL per mouse ($4x10^6$ cpm/mL) administered

intraperitoneally into C57BL/6 WT mice fed on normal diet as indicated in Figure 5C. Mice were

then individually housed in metabolic cages and feces in the cage floor were collected for 2 days.

At 48h, mice were sacrificed and blood, liver, intestinal contents were collected in Figure S8.

Serum [^{3}H]-cholesterol was measured by liquid scintillation counting. [^{3}H]-HDL cholesterol was

determined after precipitation of ApoB-containing lipoproteins with 0.44mM phosphotungstic

acid and 20mM $MgCl_2$. Liver, fecal and intestinal lipids were extracted with hexane- isopropanol

(3:2, v:v) and partitioned against Na_2SO_4. The lipid layer was collected and dried for 48h using

nitrogen gas in a fume hood, and [^{3}H]-cholesterol radioactivity was measured by liquid

scintillation counting (4mL scintillation fluid for 4 min). The [^{3}H]-radioactivity observed in fecal

biliary acids was determined in the remaining aqueous phase of fecal material extracts. The amount

of [^{3}H]-radioactivity was expressed as a percentage of the total injected dose, which was taken as

100%.

1288   Synthesis of DSPE-PEG-S2P, preparation and characterization of S2PNP-siRNA

To construct the lesional macrophage-targeted siRNA NPs, S2P peptide-conjugated DSPE-

PEG (DSPE-PEG-S2P) was first synthesized via a thiol-maleimide Michael addition click reaction

between S2P peptide (CRTLTVRKC, GLS Biochem Systems Inc.) and DSPE-PEG-Mal [PEG

molecular weight, 3.4 kDa; Nanocs Inc.], as reported previously (Tao et al., 2020). Then, a robust

self-assembly method was used to prepare the targeted polymer-lipid hybrid NPs for siRNA

delivery (Tao et al., 2020; Zhu et al., 2015). In brief, G0-C14 and PLGA were dissolved separately

in anhydrous dimethylformamide (DMF) to form a homogeneous solution at the concentration of

2.5 mg/mL and 5 mg/ml, respectively. DSPE-PEG-OCH3 (DSPE-mPEG) and DSPE-PEG-S2P

were dissolved in HyPure water (GE Healthcare Life Sciences, catalog no. SH30538) at the

concentration of 0.1 mg/mL. 1 nmol Epsin1 siRNA and 1 nmol Epsin2 siRNA were gently mixed

with 100 µl of the G0-C14 solution. The mixture of siRNA and G0-C14 was incubated at room

temperature for 15 min to ensure the full electrostatic complexation. Next, 500 µl of PLGA

polymers were added and mixed gently. The resultant solution was subsequently added dropwise

into 10 mL of HyPure water containing 1 mg lipid-PEGs (i.e., 50% DSPE-PEG-S2P and 50%

DSPE-mPEG hybrids for the S2P-targeted siRNA NPs, or 100% DSPE-mPEG for the non-targeted

siRNA NPs) under magnetic stirring (1,000 rpm) for 30 min. The siRNA NPs were purified by an

ultrafiltration device (EMD Millipore, MWCO 100 kDa) to remove the organic solvent and free

excess compounds via centrifugation at 4 °C. After washing 3 times with HyPure water, the siRNA

NPs were collected and finally resuspended in pH 7.4 PBS buffer. The NPs were used freshly or

stored at -80 °C for further use. The physicochemical properties (particle size and surface charge)

of S2PNP-siEpsin1/2 were characterized by dynamic light scattering (DLS, Brookhaven

Instruments Corporation). The S2PNP-siEpsin1/2 was ~89 nm in size as measured by DLS, and

their surface charge was determined to be ~ -5.3 mV.

Statistical analysis

Statistical analysis was processed using GraphPad Prism 8.4. Data are shown as mean $\pm$

standard deviation (mean $\pm$ SD). Normality was determinedusing D'Agostino-Pearson normality

testing for experiments with $n \geq 8$ and Kolmogorov-Smirnovnormality testing for experiments

with $n < 8$. Data were analyzed by the unpaired Student's t-test or Mann-Whitney U test where

appropriate for two groups. Data for multiple groups were analyzed with ANOVA with Bonferroni

test or Dunn'smultiple comparison test where appropriate. P value less than 0.05 was considered

significant.

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Fig. S1

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Fig. S1. Differentially expressed genes between WT and DKO macrophages. (**A**) A volcano

plot showing differential gene expression in Epsin deficient (DKO) and wild type (WT)

macrophages. Red and blue indicate up- and down-regulated genes, respectively. (**B**) A heatmap

exhibits the expression values of up- and down-regulated genes in each sample. (**C**) Bar plots

showing log2 fold changes of the top 30 up- and down-regulated genes between DKO and WT

macrophages. Up- (red) and down-regulated (blue) genes are indicated.

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Fig. S2

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1331   **Fig. S2. Representative shared differentially expressed genes in DKO and CD36 knock out**

1332   **macrophage.** (**A-C**) Genome browser tracks to show expression values of three representative

1333   genes. The arrows on the gene model indicate the direction of transcription.

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Fig. S3. Foam cell genes are downregulated in Epsin-deficient macrophages. (**A**) GSEA shows that downregulated genes in DKO versus WT tend to be expressed at higher levels in foam cells relative to normal macrophages (non-foam cells). (**B**) Genes downregulated in DKO compared to WT: The top 20 genes that were highly expressed in foam cells relative to normal macrophages were selected to plot expression values in the heatmap. (**C**) GSEA shows that the genes upregulated in DKO vs WT tend to be expressed at higher levels in macrophages relative to foam cells. (**D**) Among the genes upregulated in DKO compared to WT macrophages, the top 20 genes expressed at higher levels in macrophages relative to foam cells were selected to plot expression values in the heatmap.

Fig. S4

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Fig. S4. Gating strategy used in the flow cytometric evaluation for Fig. 2C and 2H. (**A**)

Macrophages isolated from WT (n=6) and DKO (n=6) mice were incubated in lipid-deficient

medium for 24h followed by treatment with oxLDL for 2h, then staining with CD36-Alex488 and

cytometric analyses. (**B**) Macrophages isolated from WT (n=6) and DKO (n=6) mice were

incubated in lipid-deficient medium for 24h followed by the treatment of 10 μg/mL Dil-oxLDL

for 2h at 37^0C and assessed the uptake of lipoproteins by flow cytometry. The major macrophage

population was selected in forward vs side scatter plots and single cell determination was

performed by FSC-H vs FSC-A. CD36 (A) or DiI-oxLDL (B) positive macrophages were

presented in Fig. 2C and 2H, respectively.

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Fig. S5

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Fig. S5. The loss of Epsins reduced oxLDL uptake by macrophages. (**A**) Isolated peritoneal

macrophages from WT (n=6) and DKO (n=6) mice were pre-incubated with 25μg/mL oxLDL for

24h in lipid-deficient medium and stained with BODIPY (lipids, green), F4/80 (macrophage, red),

and DAPI (blue), **WT vs DKO group, n=6, P<0.01, scale bar=200μm. (**B**) ORO staining of

peritoneal macrophages, which were pre-incubated with 25μg/mL oxLDL for 24h in lipid-

deficient medium, **WT vs DKO group, n=6, P<0.01, scale bar=20μm. Data are presented as

mean ± SD and were analyzed using an unpaired Student's t-test.

Fig. S6

1375 **Fig. S6. Transfection of full-length Epsin1 and constructs with the ENTH and UIM domains**

1376 **deleted into WT macrophages did not affect lipid uptake.** Constructs of FLAG-Epsin1 WT,

1377 △ENTH, and △UIM were transfected into ApoE$^{-/-}$/WT macrophages for 48h and treated with

1378 100 μg/mL oxLDL for 1h, followed by staining with F4/80 (red), BODIPY (green) and DAPI

1379 (blue). Scale bars=200μm. Statistical analyses are presented in Fig. 3E.

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Fig. S7

Fig. S7. Differentially expressed genes between WT and ABCG1 knockout (ABCG1KO)

macrophages. (**A**) A volcano plot showing differential gene expression in ABCG1KO and WT

macrophages. Red and blue indicate up- and down-regulated genes, respectively. (**B**) A heatmap

exhibiting the expression values of up- and down-regulated genes in each sample. (**C**) Bar plots

showing log2 fold changes of the top 30 up- and down-regulated genes between ABCG1KO and

WT macrophages. Up- (red) and down-regulated (blue) genes are indicated. (**D-F**) GSEA (top

panels) indicated the tendency of individual pathways to be up- or down-regulated in response to

DKO or ABCG1KO compared to WT cells. Genes associated with cell activation involved in

immune response (GO:0002263) (D), regulation of leukocyte migration (GO:0002685) (E), and

leukocyte proliferation (GO:0070661) (F) were analyzed. The bar plots (bottom panels) showing

log2 fold change of altered genes in these pathways.

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Fig. S8

Fig. S8. Schematic of the quantification for radiolabeled cholesterol. [³H]-cholesterol was measured in serum and HDL after precipitating ApoB-containing lipoproteins. Liver, feces and intestinal lipids were extracted with hexane–isopropanol and partitioned against Na₂SO₄. Liver [³H]-radioactivity was determined in the upper layer, which contains the [³H]-cholesterol. In the feces extract, the amount of [³H]-radioactivity was determined in the upper layer (neutral sterols) and the lowest layer (bile acids). In the intestinal contents, [³H]-radioactivity was determined in the upper layer.

Fig. S9

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1407 **Fig. S9. Gene expression levels of indicated genes in WT and DKO macrophage.** Peritoneal

1408 macrophages were isolated from WT (n=5) and DKO (n=5) mice. Total RNA was extracted and

1409 mRNA levels of ABCG1, Epsin1, and Epsin2 were measured (NS=no significant difference, **

1410 WT vs DKO group, n=5, P<0.01). Data are presented as mean ± SD and analyzed using an

1411 unpaired Student's t-test.

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Fig. S10

Fig. S10. Gating strategy used in the flow cytometric evaluation for Fig. 6C. (A) Macrophages

isolated from WT and DKO mice were incubated in lipid-deficient medium and treated with LXR

agonist for 24h followed by treatment with or without 100 μg/mL oxLDL for 5min, 15min, and

45min, and then stained with ABCG1. Surface levels of ABCG1 were assessed by flow cytometry.

The major macrophage population was selected in forward versus side scatter plots and single cell

determination was performed by FSC-H vs FSC-A. Isotype controls were gated in the histogram

as M1 for the negative control of experimental groups. **(B)** Statistical analysis is presented for Fig.

6C. At least three independent experiments were performed for statistical analysis (*-oxLDL vs

+oxLDL 5min, P<0.05; [##]-oxLDL vs +oxLDL 15min, P<0.01; [&&]-oxLDL vs +oxLDL 45min,

P<0.01). Data are presented as mean ± SD and analyzed using one-way ANOVA.

Fig. S11

Fig. S11. The expression of ABCG1 decreased with progression of atherosclerotic lesions in

humans and mice. (**A-B**) Immunostaining of CD68 (red), ABCG1(green) and DAPI (blue) of

human patient aortic arch sections (A, n=3) and mouse aortic root sections (B, n=3) in early and

advanced stage of atherosclerosis （white dashed line outlined in CD68). Mean fluorescence

intensity (MFI), **Mild vs Severe lesion, P<0.01, scale bar, A=50μm, B=200μm. Data are

presented as mean ± SD and were analyzed using an unpaired Student's t-test.

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Fig. S12

Fig. S12. Characterization and silencing efficacy of S2P-conjugated siEpsin1/2 NPs. (A) Schematic of the targeted hybrid siRNA NP platform composed of a lipid-PEG shell with a lesion macrophage specific targeting ligand, S2P peptide, and a PLGA core. (**B-C**) Macrophages from WT mice were treated with S2PNP-siCtrl or S2PNP-siEpsin1/2 for 24h, RNA and proteins were isolated, qRT-PCR (B) and western blot (C) was performed to check the expression of Epsin 1 and 2 levels (n=3), **S2PNP-siCtrl vs S2PNP-siEpsin1/2 for Epsin1 expression, P<0.01; ##S2PNP-siCtrl vs S2PNP-siEpsin1/2 for Epsin2 expression, P<0.01. Data are presented as mean ± SD and analyzed using an unpaired Student's t-test.

Fig. S13

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Fig. S13. S2PNP-siEpsin1/2 treated macrophages show reduced foam cell formation. (**A-B**)

Macrophages isolated from ApoE^{-/-} mice were incubated in lipid-deficient medium and treated

with S2PNP-siCtrl or S2PNP-siEpsin1/2 for 48h, follow with treatment of 100 μg/mL oxLDL (A)

or serum (B) collected from ApoE^{-/-} mice fed a WD for 8 weeks. ORO staining was performed (**

S2PNP-siCtrl vs S2PNP-siEpsin1/2 group, n=6, P<0.01, scale bar=50μm). Data are presented as

mean ± SD and analyzed using an unpaired Student's t-test.

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Fig. S14

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Fig. S14. S2PNP-siEpsin1/2 inhibits lesion formation and macrophage accumulation in early

stage of atherosclerosis. (**A**) ApoE$^{-/-}$ mice were fed a WD for 8 weeks followed by treatment with

S2PNP-siCtrl or S2PNP-siEpsin1/2 for 3 weeks (2 doses per week). (**B**) WB of Epsin 1 and 2 after

treatment with S2PNP-siCtrl or S2PNP-siEpsin1/2 NPs using lesional lysates from the aortas (n=4

times, **S2PNP-siCtrl vs S2PNP-siEpsin1/2 for Epsin1, P<0.01; ##S2PNP-siCtrl vs S2PNP-

siEpsin1/2 for Epsin2, P<0.01). (**C-D**) Aortic roots from S2PNP-siCtrl treated ApoE$^{-/-}$ or S2PNP-

siEpsin1/2 siRNA treated ApoE$^{-/-}$ mice were stained with the macrophage marker CD68 (solid

white line) and Epsin1 or Epsin2 (dashed white line), Epsin 1 and 2 mean fluorescence intensity

(MFI) were analyzed (n=5, **S2PNP-siCtrl vs S2PNP-siEpsin1/2 for Epsin1, P<0.01, scale

bars=500 μm). Data from B-D are presented as mean ± SD and analyzed using an unpaired

Student's t-test. (**E**) *En face* ORO staining of aortas (upper panel) and aortic root sections (lower

panel) of hearts from baseline, S2PNP-siCtrl or S2PNP-siEpsin1/2 treated ApoE$^{-/-}$ mice fed a WD.

Lesion area was analyzed using one-way ANOVA (n=5, **S2PNP-siCtrl vs baseline, P<0.01,

##S2PNP-siCtrl vs S2PNP-siEpsin1/2 group P<0.01, Scale bar; aorta=5mm, aortic root=500μm).

Data from E are presented as mean ± SD and were analyzed using one-way ANOVA.

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Fig. S15

Fig. S15. Silencing lesional macrophage Epsin1/2 by S2PNP-siEpsin1/2 NP-treatment

stabilized plaques in a progression model of atherosclerosis. ApoE$^{-/-}$ mice fed a WD for 17

weeks followed by treatment with S2PNP-siCtrl or S2PNP-siEpsin1/2 for 3 weeks (two doses per

week). Van Gieson's staining of brachiocephalic artery (BCA) (upper panel) and aortic root (lower

panel) sections from baseline, S2PNP-siCtrl-, or S2PNP-siEpsin1/2-treated ApoE$^{-/-}$ mice was

performed (arrows indicate the elastic fibers, n=6, **baseline vs S2PNP-siEpsin1/2 group, P<0.01;

##baseline vs S2PNP-siCtrl group, P<0.01; &&S2PNP-siCtrl vs S2PNP-siEpsin1/2 group, P<0.01,

scale bar=250 μm). Data are presented as mean ± SD and were analyzed using one-way ANOVA.

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Fig. S16

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Fig. S16. Delivery of S2PNP-siEpsin1/2 does not change cholesterol and triglyceride levels of

ApoE$^{-/-}$ mice fed a WD. Plasma from ApoE$^{-/-}$ mice fed a WD for 17 weeks (before NP injection),

followed by an additional 3 weeks of treatment with S2PNP-siCtrl or S2PNP-siEspsin1/2, showed

no alteration in triglyceride, cholesterol, HDL and non-HDL (LDL/VLDL) cholesterol levels (n=5;

NS, no significant difference). Data are presented as mean ± SD and were analyzed using a one-

way ANOVA.

Fig. S17

Fig. S17. Silencing macrophage Epsin1/2 by S2PNP-siEpsin1/2 NPs reduces lesion size in a

regression model of atherosclerosis. (**A**) ORO staining of BCA sections in baseline, S2PNP-

siCtrl or S2PNP-siEpsin1/2 treated PCSK9-mice was performed and lesions were indicated (dash

lines) (n=6, **Baseline vs S2PNP-siEpsin1/2 group, P<0.01; [&]Baseline vs S2PNP-siCtrl group,

P<0.05; [##]S2PNP-siEpsin1/2 vs S2PNP-siCtrl group, P<0.01; scale bar=500μm). (**B**) Van Gieson's

staining of BCA sections from above three groups was performed (n=6, **Baseline vs S2PNP-

siEpsin1/2 group, P<0.01; [##]Baseline vs S2PNP-siCtrl group, P<0.01; [&&]S2PNP-siEpsin1/2 vs

S2PNP-siCtrl, P<0.01; scale bar=500μm). Data in A and B are presented as mean ± SD and

analyzed using one-way ANOVA. (**C**) qRT-PCR analysis to confirm expression of the indicated

genes (n=3, **DKO vs WT group, P<0.01). Data are presented as mean ± SD and analyzed using

an unpaired Student's t-test.

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Fig. S18

Fig. S18. Summary schematic diagram of the study. (A) In the progression model of

atherosclerosis, the plaque size and lesions increase in the artery on western diet feeding. The

delivery of S2PNP-siEpsin1/2 significantly slowed the progression of atherosclerosis compared to

S2PNP-siCtrl group. In the regression model of atherosclerosis, plaque size and lesion area were

dramatically reduced with the intravenously injection of S2PNP-siEpsin1/2. (**B-C**). Under the

stimuli of oxLDL, Epsin binds to CD36 and ABCG1 through Epsin ENTH and Epsin UIM

domains, respectively. In B, Epsin facilitates CD36-mideated lipid uptake via recycling

endosomes. The loss of Epsin impairs the internalization of CD36, which results in reduced lipid

uptake. While in C, Epsin promotes endocytic degradation of ABCG1via lysosomes, which leads

to reduced total and surface level of ABCG1.

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Table S1. List of reagents and animal models

REAGENT or RESOURCE	SOURCE	Note
Primary Antibodies		
Rabbit polyclonal anti-Epsin1	Home made	N/A
Rabbit polyclonal anti-Epsin2	Abcam	Cat# ab74942
Rabbit polyclonal anti-Epsin2	Home made	N/A
Rat monoclonal Anti-mouse /SR-B3CD36	R & D System	Cat# MAB2519,
Rabbit monoclonal anti-CD36	Invitrogen	Cat# VL3153825
Mouse monoclonal anti-GAPDH	Santa Cruz Biotechnology	Cat# F118, sc166545
Mouse monoclonal anti-ubiquitin	Cytoskeleton, Inc	Cat# AUB01
Rabbit polyclonal anti-ABCA1	Novus Biologicals	NB400-105SS
Rabbit polyclonal anti-ABCG1	Novus Biologicals	NB400-132B,
Rabbit monoclonal anti-ABCG1	Invitrogen	Cat# VK3126422
Goat polyclonal anti mouse LDLR	R & D System	Cat# AF2255
Rat monoclonal Anti-mouse SRA1	R & D System	Cat# MAB1797
Monoclonal anti-Flag	Sigma-Aldrich	Cat# F3165
Rat monoclonal anti-F4/80	Santa Cruz Biotechnology	Cat# sc59171
F4/80 monoclonal antibody, APC	ThermoFisher Scientific	Cat# MF48005
Anti-mouse F4/80-Alexa Fluro 488	Invitrogen/eBioscience	Cat# 2126068
Goat polyclonal anti-EEA1	Santa Cruz Biotechnology	Cat# B1813, sc6415
Mouse monoclonal anti-Rab11	Santa Cruz Biotechnology	Cat# H0919, sc166912
Mouse monoclonal anti-Lamp1	Santa Cruz Biotechnology	Cat#F1609, sc18821
Rabbit polyclonal anti-CD68	Santa Cruz Biotechnology	Cat# sc9139
Anti-Actin, α-Smooth Muscle - Cy3™ antibody, Mouse monoclonal α-SMA	Sigma-Aldrich	Cat# C6198
Rat-anti Mouse CD31	BD Pharmingen	Cat# 550274
Goat monoclonal P-selectin	Santa Cruz Biotechnology	Cat# G1411, sc6943

Mouse monoclonal E-selectin	Santa Cruz Biotechnology	Cat# sc137054
Goat polyclonal ICAM-1	Santa Cruz Biotechnology	Cat# sc1511
Mouse monoclonal VCAM-1	Santa Cruz Biotechnology	Cat# sc13160
Alexa Fluor Conjugated Second Antibodies		
Goat anti-rabbit 647	Invitrogen	Cat# A-21244
Goat anti-rat 647	Invitrogen	Cat# A-21247
Donkey anti-mouse 594	Invitrogen	Cat# A-21203
Donkey anti-rabbit 594	Invitrogen	Cat# A-21207
Donkey anti-rat 594	Invitrogen	Cat# A-21209
Donkey anti-rat 488	Invitrogen	Cat# A-21208
Donkey anti-mouse 488	Invitrogen	Cat# A-21202
Donkey anti-rabbit 488	Invitrogen	Cat# A-21206
Biological Samples		
Atherosclerosis patient's arch samples	Maine Medical Center (MRC)BioBank, Maine	N/A
Normal population's arch samples	Maine Medical Center (MRC)BioBank, Maine	N/A
Mouse aortic roots and hearts	This study	N/A
Mouse serum	This study	N/A
Chemicals, Peptides, and Recombinant Proteins		
Oil Red O (ORO)	AMRESCO	Cat# 0684-100G
Hematoxylin and Eosin stain kit	Vector Laboratories	Cat# H-3502
Oxidized LDL (ox-LDL)	Athens Research and Technology	Cat#12-16-120412-ox
Acetylated LDL (Ac-LDL)	Invitrogen	Cat#2300941
Low Density Lipoprotein from Human Plasma, oxidized, DiI conjugate (DiI-OxLDL)	ThermoFisher Scientific	Cat# L34358
TopFluor Cholesterol	Avanti Polar Lipids,Inc	Cat# 810255p

MG132	Sigma-Aldrich	Cat# M7449
N-Ethylmaleimide (NEM)	Alfa Aesar	Cat# 40526
Brewer Thioglycollate Medium	Sigma-Aldrich	Cat#124k0115
Bodipy 493/503	Invitrogen	Cat# D3922
SlowFade mount with DAPI	Invitrogen	Cat# 1896320
M-CSF mouse	Prospec	Cat# cyt-439-b
Protein inhibitor cocktail	TargetMol	Cat# C0001
Phalloidin-iFluor 594 reagent	Abcam	Cat# ab176751
Liver x receptor agonist (LXR T0901317)	Apexbio Tech LLC	Cat#A2249
Mouse seroblock FCR	Bio-Rad	Cat# BuF041B
Phosphotungstic acid hydrate	ACROS	Cat#A0417659
[1,2-^{3}H]-Cholesterol	PerkinElmer	Cat# NET139001MC
Liquid scintillation fluid OPTI-Flour	PerkinElmer	Cat# 47-20081
Apoprotein A-I (ApoA1)	Sigma-Aldrich	Cat# A0722
High density lipoprotein (HDL)	Sigma-Aldrich	Cat# L8039
Hexane	ThermoFisher Scientific	Cat# 610070040
Isopropanol, molecular biology grade	ThermoFisher Scientific	Cat# T036181000CS
Cholesterol acyltransferase (ACAT) inhibitor	Sigma-Aldrich	Cat# S9318-5mg
Lipofectamine 2000 transfection reagent	Invitrogen	Cat#11668027
Lipofectamine LTX	Invitrogen	Cat# A12621
ImageiT™ signal enhancer	Invitrogen	Cat# 136933
Qiagen RNeasy Mini Kit	Qiagen	Cat# 74106
RNase-free DNAse 1	New England Biolabs	Cat# M0303S
SuperScript III First-Strand Synthesis SuperMix	ThermoFisher Scientific	Cat# 18080400
SYPR Green PCR Master Mix reagent	GeneCopoeia	Cat# QP001-01
Aqueous Mounting Medium	R & D Systems	Cat# CTS011

Protein A/G plus agarose	Santa Cruz Biotechnology	Cat# Sc-2003
EZ-Link Sulfo-NHS-LC-Biotin	ThermoFisher Scientific	Cat# 21335
Neutravidin Beads	ThermoFisher Scientific	Cat# 29200
S2P-peptide (CRTLTVRKC)	GLS Biochem Systems Inc	Cat# 625358
DSPE-PEG-Mal (MW, 3.4 kDa)	Nanocs Inc.	Cat# PG2-DSML-3k
Cationic ethylenediamine core-poly(amidoamine) (PAMAM) dendrimer generation 0 (G0)	Sigma-Aldrich	Cat# 412368
Ester-terminated PLGA	DURECT Corporation	Cat# B6013-2
Amaxa^{TM} Mouse macrophage nucleofector kit	Lonza	Cat# VPA-1009
Recombinant DNA		
pcDNA	Kai Song et al, 2021	N/A
Flag-Epsin1^{WT}	Yunzhou Dong et al, 2020	N/A
Flag-Epsin1$^{\Delta UIM}$	Yunzhou Dong et al, 2020	N/A
Flag-Epsin1$^{\Delta ENTH}$	Yunzhou Dong et al, 2021	N/A
CD36-bio-His: CMV plasmid	Addgene	Cat# 52025
ABCG1-pCSdest: SP6 plasmid	Addgene	Cat# 53952
Commercial Assays		
BAC-protein concentration measurement kit	Thermo Fisher Scientific	Cat# 23225
SuperSignal™ West Pico Chemiluminescent Substrate	Thermo Fisher Scientific	Cat#: 34080
Experimental Models: Organisms/Strains		
ApoE$^{-/-}$ atherosclerosis mouse model	Jackson Laboratory	Cat# 008525
Epsin mutant mouse model	This study	N/A
LysM-Cre deleter mice	This study	Cat# 004781
ABCG1^{fl} mouse model	This study	Cat# 027954
Experimental Models: Cell Lines		

HEK-293T	ATCC	CRL-3216
Virus Strain		
rAAV8-D377Y-mPCSK9	Boston Children's Hospital Viral Core Facility	N/A
Deposited Data		
N/A		
Oligonucleotides		
Epsin1: Forward: 5'-CTACCAACGTCCATTGCGGT-3' Reverse: 5'-GCAGCGATGAGGTCGACATT-3'	This study	N/A
Epsin2: Forward: 5'-TCTATCAGACGGCAGATGAAAAAC-3' Reverse: 5'-GTCATTGGAGGTGGCCTCC-3'	This study	N/A
IL-6 Forward: 5'-AGTCCGGAGAGGAGACTTCA-3' Reverse: 5'-TTCCACGATTTCCCAGAG-3'	This study	N/A
IL-1beta Forward: 5'-GAAGAAGAGCCCATCCTCTG-3' Reverse: 5'-TCATCTCGGAGCCTGTAGTG-3'	This study	N/A
TNF-alpha Forward: 5'-ATGAGAAGTTCCCAAATGGC-3' Reverse: 5'-CTCCACTTGGTGGTTTGCTA-3'	This study	N/A
MCP-1 Forward: 5'-GAAGGAATGGGTCCAGACAT-3' Reverse: 5'-ACGGGTCAACTTCACATTCA-3'	This study	N/A
iNOS Forward: 5'-CCCTTCCGAAGTTTCTGGCAGC-3' Reverse: 5'-GGCTGTCAGAGCCTCGTGGCTTTGG-3'	This study	N/A
IL-10 Forward: 5'-CCCAGAAATCAAGGAGCATT-3'	This study	N/A

Reverse:5'-TCACTCTTCACCTGCTCCAC-3'		
Arg1	This study	N/A
Forward: 5'-CAGTGGCTTTAACCTTGGCT-3'		
Reverse: 5'-GTCAGTCCCTGGCTTATGGT-3'		
ABCG1	This study	N/A
Forward: 5'-CCGATGTCCCCTTTCAGATCA-3'		
Reverse: 5'-AGCAGCGAACAGCACAAAAC-3'		
ABCA1	This study	N/A
Forward: 5'-GTGGGCTCCTCCCTGTTTTT-3'		
Reverse: 5'-TCTGAGAAACACTGTCCTCCTTTT-3'		
CD36	This study	N/A
Forward: 5'-GCTGTCAGGCGTCAGGATAA-3'		
Reverse: 5'-CACATTTCAGAAGGCAGCAACT-3'		
CCR7	This study	N/A
Forward: 5'- CATGGACCCAGGTGTGCTT-3'		
Reverse: 5'- CATGAGAGGCAGGAACCAGG-3'		
Netrin-1	This study	N/A
Forward: 5- GGAGGAACCGGAAGACTGTG-3'		
Reverse: 5- GTCCTCGGCATTACCCAACA-3'		
Sema 3a	This study	N/A
Forward: 5'- ACGCACCATGGCACCG-3'		
Reverse: 5'- GTGCTAGGCCAGTATATCTCTCTG-3'		
Beta-actin	This study	N/A
Forward: 5'- TTACTGCTCTGGCTCCTAGCA-3'		
Reverse: 5'-CCACCGATCCACACAGAGTAC-3'		
Mouse Epsin1 siRNA sequence	This study	N/A
GAACUGGAGGCACGUCUACAAUU		
Mouse Epsin2 siRNA sequence	This study	N/A
GCAGUGCCGUGAGAACAUCUUUU		
Mouse control luciferase siRNA sequence	This study	N/A

CUUACGCUGAGUACUUCGA dT dT

Software and Algorithms		
Image J	NIH website: https://imagej.nih.gov/ij/	N/A
GraphPad Prism	GraphPad software company: https://www.graphpad.com/sci entific-software/prism/	N/A
BioRender	BioRender http://app.biorender.com	N/A
Zeiss Zen lite	https://www.zeiss.com/microscopy/us/products/microscope-software/zen-lite.html	N/A

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