Targeting Epsins by nanotherapy regulates lipid metabolism and promotes

ABCG1-mediated cholesterol efflux to fortify atheroma regression

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19 **Short title:** Epsins regulate lipid metabolism and transport
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25 **Nonstandard Abbreviations and Acronyms**

AAV8	adeno-associated virus-8
ABCG1	ATP Binding Cassette Subfamily G Member 1
ACAT	acyl-CoA cholesterol acyltransferase
AMI	acute myocardial infarction
BCA	brachiocephalic artery
CAD	coronary artery disease
CEC	cholesterol efflux capacity
DKO	double knockout
ENTH	epsin N-terminal homology
GEM	gel beads-in-emulsion
GO	gene ontology
GSEA	gene set enrichment analysis
HDL	high density lipoprotein
ICAM-1	intercellular adhesion molecule-1
IF	immunofluorescence staining
IP	immunoprecipitation
LXR	liver X receptor
M-CSF	macrophage colony stimulating factor
NP	nanoparticle
ORO	oil red O
oxLDL	oxidized low-density lipoprotein
PCSK9	proprotein convertase subtilisin/kexin type 9 serine protease
RCT	reverse cholesterol transport
scRNA-seq	single-cell RNA sequencing
siRNA	small interfering RNA
SR-A	scavenger receptor-A
S2PNP-siEpsin1/2	S2P-conjugated Epsins 1 and 2 siRNA nanoparticle
S2PNP-siCtrl	S2P-conjugated Control nanoparticle
TG	thioglycolate
UIM	ubiquitin-interacting motif
VCAM-1	vascular cell adhesion molecule-1
VSMCs	vascular smooth muscle cells
WB	western blot
WD	western diet

ABSTRACT

BACKGROUND: Excess cholesterol accumulation in lesional macrophages elicits complex responses in atherosclerosis. Epsins, a family of endocytic adaptors, fuel the progression of atherosclerosis; however, the underlying mechanism and therapeutic potential of targeting Epsins remains unknown. In this study, we determined the role of Epsins in macrophage-mediated metabolic regulation. We then developed an innovative method to therapeutically-target macrophage Epsins with specially-designed S2P-conjugated lipid nanoparticles (NPs), which encapsulate small interfering RNAs to suppress Epsins.

METHODS: We used single cell RNA sequencing (scRNA-seq) with our newly developed algorithm MEBOCOST to study cell-cell communications mediated by metabolites from sender cells and sensor proteins on receiver cells. Biomedical, cellular and molecular approaches were utilized to investigate the role of macrophage Epsins in regulating lipid metabolism and transport. We performed this study using myeloid-specific Epsin double knockout (LysM-DKO) mice and mice with a genetic reduction of ABCG1 (LysM-DKO-ABCG1$^{fl/+}$). The NPs targeting lesional macrophages were developed to encapsulate interfering RNAs to treat atherosclerosis.

RESULTS: We revealed that Epsins regulate lipid metabolism and transport in atherosclerotic macrophages. Inhibiting Epsins by nanotherapy halts inflammation and accelerates atheroma resolution. Harnessing lesional macrophage-specific NP delivery of Epsin siRNAs, we showed that silencing of macrophage Epsins markedly diminished atherosclerotic plaque size and promoted plaque regression. Mechanistically, we demonstrated that Epsins bound to CD36 to facilitate lipid uptake by enhancing CD36 endocytosis and recycling. Conversely, Epsins promoted ABCG1 degradation via lysosomes and hampered ABCG1-mediated cholesterol efflux and reverse cholesterol transport. In a LysM-DKO-ABCG1$^{fl/+}$ mouse model, enhanced cholesterol efflux and reverse transport due to Epsin deficiency was suppressed by the reduction of ABCG1.

CONCLUSIONS: Our findings suggest that targeting Epsins in lesional macrophages may offer therapeutic benefits for advanced atherosclerosis by reducing CD36-mediated lipid uptake and increasing ABCG1-mediated cholesterol efflux.

Key Words: Epsin, nanoparticle, lipid metabolism, atherosclerosis, CD36, ABCG1

Novelty and Significance

WHAT IS KNOWN?

- Epsin endocytic adaptor proteins are upregulated in human and mouse atherosclerotic lesions

- Lesional macrophages internalize lipids primarily through scavenger receptor-mediated endocytosis such as CD36 and SR-A

- Macrophage-mediated cholesterol efflux and reverse cholesterol transport is crucial to atheroma resolution

WHAT NEW INFORMATION DOES THIS ARTICLE CONTRIBUTE?

- ScRNA-seq combined with the newly-developed algorithm MEBOCOST reveals that Epsins are involved in macrophage-mediated lipid metabolic regulation

- Macrophage epsins promote lipid uptake by targeting CD36 endocytosis and membrane recycling via the Epsin ENTH domain

- Epsins bind ubiquitinated ABCG1—resulting in the endocytosis and lysosomal degradation of this cholesterol transporter, which reduces cholesterol efflux.

- Macrophage-specific, nanoparticle-mediated RNAi delivery exhibits a therapeutic benefit for the treatment of atherosclerosis

- Atherosclerotic plaque regression using this nanoparticle delivery platform represents a clinically-relevant approach for the treatment of advance atherosclerosis

BRIEF SUMMARY

Despite the development of new cholesterol-lowering therapies, including 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 employed a novel nanomedicine platform containing a stabilin-2 targeting peptide (S2P) to

deliver Epsin-specific siRNAs to lesional macrophages. We discovered that inhibition of these

adaptor proteins in lesional macrophages significantly diminished plaque size and necrotic core

area, increased fibrous cap thickness, and promoted plaque regression.

INTRODUCTION

Atherosclerosis is a complex and chronic condition that results in a buildup of arterial fatty

deposits, called plaques that are the root cause of coronary heart disease, ischemic stroke, and

peripheral artery disease [1,2]. 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 [3,4]. Mounting evidence indicates that

factors with the potential to promote macrophage egress from plaques (*e.g.*, regulatory T cells)

play a critical role in regulating macrophage pro-resolving functions during atherosclerosis

regression [5]. Furthermore, the pro-inflammatory effects of oxLDL lead to endothelial activation

and macrophage recruitment [6]. Invading macrophages in the sub-endothelium ingest modified

LDL and are transformed into lipid-laden foam cells [1,3]. This escalates arterial inflammation—a

prime contributor to the transition from a stable to vulnerable atheroma [7-10]. Accordingly, patients

that receive a therapeutic cocktail aimed at alleviating dyslipidemia and hypertension still develop

deleterious cardiovascular diseases [2,11]. 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 [12-14], 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 [15-18]. Epsins 1 and 2 are ubiquitously expressed, redundant in function,

and essential for embryonic survival [19]. 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 [19,20].

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 [19-26]. Notably, we demonstrate that myeloid-specific Epsin loss

downregulates inflammation and impedes atheroma formation in an atherogenic mouse model by

stabilizing macrophage LRP-1 [26]. 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 [27], which is also responsible for foam cell formation [28-32]. Mice lacking both Scavenger

Receptor-A (SR-A) and CD36 revealed that CD36 is the major oxLDL receptor required for foam

cell formation [29-32]. Our previous studies revealed that Epsins 1 and 2 are upregulated in lesional

macrophages [26]. Epsin-deficient (DKO) macrophages exhibited a striking reduction in foam cell

formation [26]. As robust lipid uptake by macrophages is one of major responsible factors that drive

foam cell formation, we posit a central role for Epsins in regulating lipid uptake in macrophages;

however, how Epsins facilitate lipid uptake and whether this occurs through scavenger receptor-

mediated uptake of modified LDL during foam cell formation remains unknown.

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 [33]. 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 [34-36]. 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 [37]. HDL is thought to facilitate

macrophage re-programming to be less inflammatory through an ATF-3-dependent pathway [38].

Several clinical trials and more recent work suggest that increased HDL-cholesterol

concentrations fail to improve cardiovascular disease outcomes [39-41]; yet, new data indicate that

rather than the steady-state HDL-cholesterol (HDL-C) levels [42], the ability of HDL particles to

transport cholesterol from atherosclerotic plaques to the liver is more important [43,44].

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 [45-48]. As lack of effective

cholesterol efflux in macrophages hinders the reversal of foam cells to healthy macrophages, we

envisioned a major role for macrophage Epsins in regulating cholesterol efflux. Given the

importance of cholesterol efflux and RCT in atheroma resolution and the aforementioned risk

reduction in AMI patients [34-36], it is crucial to determine whether Epsins inhibit cholesterol efflux

and RCT to promote atherosclerotic plaque progression and impede its regression.

In this study, we harnessed innovative single-cell bioinformatics technology and therapeutic

nanotechnology to better understand atherosclerosis. This allowed us to determine the detrimental

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

atherosclerosis regression model. Mechanistically, we utilized scRNA-seq analysis of

macrophages and newly-developed bioinformatic techniques to identify new targets involved in

lipid metabolism during atherosclerosis. Based on these new targets, we generated a myeloid-

specific-deficient ABCG1 murine 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 an entirely new phenomenon in the field

of lipid metabolism. We also employed a novel macrophage-specific nanoparticle delivery system

to investigate the therapeutic treatment of atherosclerosis. Lastly, using an early-stage progression

model, an advanced-stage progression model, and a regression model of atherosclerosis we

established the therapeutic benefit of treating this disease with a nanoparticle delivery system.

This rigorous and comprehensive mechanistic study on lipid metabolism, and clinically-relevant

nanoparticle-mediated RNAi therapies represents a potential breakthrough for treating this

devastating disease.

METHODS

Detailed Methods and materials are available in the Supplemental Materials. Antibodies,

primers, and reagents are listed in Supplemental 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 [26]. 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 [26]. 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.

Aortic single-cell preparation and single-cell RNA (scRNA) sequencing

WT and DKO mice were euthanized by CO2 inhalation. The aortas were isolated after

perfusion with 30 mL of PBS through left ventricular and quickly transferred to cold DMEM

medium. Aortas from the two groups were cut into about small pieces and digested with an enzyme

solution (5mg/mL collagenase type I, 5mg/mL collagenase type IV, and 5mg/mL liberase) for

90min at 37 °C on a shaker. The digested cell suspension was filtered through a 40 μm strainer

and washed twice with PBS. The cells were resuspended and ready for sequencing in PBS with

0.04% bovine serum albumin, and their viability was over 90%.

Single-cell RNA-Seq library construction was performed using the protocol provided by 10X

Genomics. In brief, the single-cell suspensions from both groups, reagents, gel beads and

partitioning oil were loaded to 10X Chromium Chip G to generate single-cell Gel Beads-in-

emulsion (GEMs, Single cell 3' Reagent Kits v3.1, 10X Genomics). scRNA was barcoded through

reverse transcription in individual GEMs followed by a post GEM-RT cleanup and cDNA

amplification. Then, a 3'-gene expression library construction was performed. Finally, the library

was sent for sequencing.

ScRNA-seq data analysis and metabolite-sensor communication inference

The raw scRNA-seq data were processed using Cell Ranger (version 6.1.2) (10x Genomics).

The reads were mapped to the prebuilt mouse mm10 genome. The resulted gene expression matrix

in individual single cells was processed by the R package Seurat (version 4.1.0) [49]. Low-quality

cells with number of expressed genes less than 200 or larger than 5000 or with percentage of

mitochondria reads greater than 10% were dropped out. Rarely expressed genes which were

detected in less than 3 cells were removed. Mitochondria genes and ribosomal protein coding genes

were removed from the expression matrix before normalization. The high-quality data after these

filtering steps was then used at additional processing steps including log normalization, data

scaling, principal component analysis (PCA), cell clustering, and UMAP visualization. The cell

clusters were visualized by the DimPlot function. Differentially expressed genes among cell

clusters were identified by FindAllMarkers function using the default Wilcoxon test method, with

minimal percentage of expressed cells as 25% and minimal log2 fold change as 0.25. Next, marker

genes in each cell clusters were used to annotate cell types based on known marker genes in

PanglaoDB database [50] and literatures. The marker gene expressions were visualized by DotPlot

and VlnPlot function. Trajectory analysis was conducted by Monocle3 [51,52]. The metabolite-sensor

cell-cell communication was analyzed by MEBOCOST [53]. The data was analyzed following the

tutorial on the MEBOCOST website (https://github.com/zhengrongbin/MEBOCOST). scRNA-

seq expression data was used to estimate metabolite abundance and calculate communication score

for each condition. Next, results of two conditions were combined to compare the communications.

The differences in communication scores between two conditions were calculated. The prediction

of sender-metabolite-sensor-receiver communication events were visualized by barplot, flow plot

and circle plot. The metabolite abundance and sensor expression levels were exhibited by violin

plot. Index of dispersion (IOD) was calculated using communication scores across conditions as

described in the MEBOCOST paper[53]. The top 100 most variable communications were selected

for further investigation. All the data for scRNA-seq are available in Data files (S1-S2).

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 S9. 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.

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 [54]. Then, a robust self-assembly

method was used to prepare the targeted polymer-lipid hybrid NPs for siRNA delivery [54,55]. 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 ≥ 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.

RESULTS

Single-cell RNA-seq revealed that macrophage Epsins regulate cholesterol metabolism and

efflux pathways

For an unbiased analysis of all pathways regulated by Epsins in macrophages, we performed

single-cell RNA sequencing (scRNA-seq) analysis of aortic tissue isolated from wild type (WT)

and macrophage-specific DKO mice. We identified a diverse range of cell types, including

vascular smooth muscle cells (VSMCs), fibroblasts, endothelial cells, macrophages, and other cells

(Figure 1A). Known cell markers facilitated the annotation of cell types, such as the Tagln and

Acta2 for VSMCs, Pecam1 and Cdh5 for endothelial cells, Cd14 and Cd68 for macrophages[50,56,57]

(Figure S1A).　Macrophage populations were further subclustered to investigate their

heterogeneity among subpopulations (Figure 1B). Multiple well-known macrophage

subpopulations were recaptured, including M1 and M2 macrophages. Markers reported in the

literature were used to annotate the subtypes(*e.g.,* Mrc1 (Cd206) and Cd163 for M2

macrophages)[58] (Figure S1B and S1C). The composition of the aortic cell population showed

striking differences between WT and DKO aortic cells (Figure S2).

The molecular mechanisms underlying Epsin-mediated regulation of foam cell formation and

promotion of lipid uptake by macrophages are poorly understood. We therefore employed the

algorithm MEBOCOST, which is the first algorithm developed to detect cell communications

mediated by metabolites and their sensor proteins such as receptors and transporters (metabolite-

sensor cell communications) [53]. The results showed that macrophage subpopulations and VSMCs

were the top cell types ranked by the number of metabolite-sensor cell communications from the

largest to the smallest (Figure 1C). Furthermore, the numbers of metabolite-sensor cell

communications in these cell populations increased in DKO compared to WT (Figure 1C).

Macrophage subpopulations were found to not only send metabolites to other cell types, but also

receive metabolites from other cell types. They could send and receive metabolites in an autocrine

manner as well (Figure 1D). The communications between a pair of cell populations can be

mediated by multiple metabolite-sensor pairs. The overall changes in communication were

estimated by the median differences of communication scores between any two cell groups. We

observed widespread changes of cell-cell communications in DKO when compared to WT, with

both strengthened and weakened communications (Figure 1D). To gain a deeper insight into the

changed metabolite-sensor cell communications related to macrophages, we inspected individual

sender cell types of metabolites and receiver cell types of sensor proteins. First, we observed a

decrease of cholesterol-Cd36 cell communications from macrophages, especially in macrophage

cluster 2 (c2), to other cell types in DKO compared to WT (Figure 1E); second, cholesterol-Cd36

cell communications from macrophage c2 to macrophage c1 were reduced by the DKO (Figure

1F). As for the specificity of metabolite and sensor abundance in different cell types, we observed

that cholesterol and its derivative, 25-hydroxycholesterol, were highly-enriched in macrophage

populations; Cd36, the receptor of cholesterol, was also highly expressed in macrophage

populations (Figure 1G). The cell communications through cholesterol and Cd36 in macrophages

was supported by their abundance in these cells. Finally, the most variable communications in

macrophages mediated by cholesterol appeared to be mostly decreased rather than increased

(Figure 1H).

We subsequently performed bulk RNA-seq analysis of macrophages and revealed that loss of

Epsins 1 and 2 significantly altered the expression of 2208 genes (Figure S3). These include 1138

downregulated and 1070 upregulated genes (Figure S3A). 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 (Figure S3B). Consistently, Gene Set

Enrichment Analysis (GSEA) showed that genes related to fatty acid metabolism tended to be

markedly downregulated in DKO macrophages (Figure S3C). In contrast, genes associated with

cholesterol transport and efflux (Figure S3D), and negative regulation of macrophage foam cell

formation (Figure S3E), tended to be upregulated by Epsin deficiency.

We next 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 [59]. 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}) (Figure S3F 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 (Figure S3F right panels). GO

analysis revealed multiple pathways regulated by both Epsin or CD36 deficiency. These include

the downregulation of inflammation pathways, lipid biosynthetic processes, triglyceride metabolic

processes, and upregulation of the small GTPase-mediated signal transduction pathway (Figure

S3G). The results indicated that Epsins and CD36 may have superimposing roles in regulating

molecular pathways involved in lipid metabolism and inflammation.

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 thus 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 (Figure 2A) and

total protein (Figure 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 clathrin-dependent manner in WT, but not in DKO macrophages (Figure

2C and S4A-C). Immunofluorescence staining (IF) revealed oxLDL-induced CD36 trafficking to

early endosomes. We observed colocalization of CD36 with EEA1 (early endosome antigen 1,

Figure 2D) and Rab11 (recycling endosome marker, Figure 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 (Figure 2F and S5A-B) and reduced cholesterol

and triglyceride levels (Figure 2G) in DKO macrophages. Flow cytometry confirmed that

macrophage lipid uptake was reduced in DKO macrophages using DiI-oxLDL treatment (Figure

2H and S4B). 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 (Figure 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$^{\Delta ENTH}$ or FLAG-Epsin1$^{\Delta UIM}$) (Figure 3B). We

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

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

Epsin1$^{\Delta ENTH}$ and CD36 was dramatically reduced in FLAG-Epsin1$^{\Delta ENTH}$-expressing cells (Figure

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

presence of the proteasome inhibitor MG132 (Figure 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$^{\Delta ENTH}$ (Figure 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 supports raising RCT function by increasing HDL-cholesterol efflux capacity (CEC) to treat recurrent heart attacks. We have generated myeloid-specific ABCG1-knock out (ABCG1-KO) mice. Given the intimate relationship of HDL with ABCG1 in regulating cholesterol efflux, and the 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 (Figure S7A-S7C). GSEA indicated that genes associated with the inflammatory response (Figure 4A) and macrophage activation (Figure 4B) are upregulated by ABCG1-KO in macrophages. In contrast, genes negatively regulating macrophage-derived foam cell formation are downregulated by ABCG1-KO (Figure 4C). We then 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 (Figure 4D). Negative regulation of lipid storage and cholesterol biosynthetic processes were down regulated in ABCG1-KO compared to WT macrophages (Figure 4D). Interestingly, GSEA analyses showed that genes associated with cell immune responses (Figure S7D), regulation of leukocyte migration (Figure S7E) and leukocyte proliferation (Figure S7F) are markedly upregulated by ABCG1 deficiency in macrophages. In contrast, these genes are downregulated in DKO macrophages (Figure 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 [60] and it was up and down regulated by DKO and ABCG1-KO,

respectively (Figure 4E). In addition, GO enrichment analysis revealed pathways conversely

regulated by ABCG1-KO and DKO in macrophages (Figure 4F). Therefore, our RNA-seq analyses

from ABCG1-KO and Epsin-DKO further supports our findings that Epsins and ABCG1 play

opposing roles in regulating cholesterol efflux, 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

liver X receptor (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 (Figure 5A and 5B). Consistently, *in vivo* RCT (Figure 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 (Figure 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

tested whether Epsins interact with ABCG1 and governed 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 (Figure 6A). The mRNA levels of ABCG1 in both WT and DKO

macrophages remain unchanged (Figure S9). Because ABCG1 is known to mediate cholesterol

efflux to HDL [48], we hypothesized that Epsins bind ABCG1 under atherosclerotic conditions and

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

facilitate the development of atherosclerosis. When the isolated peritoneal macrophages from

DKO and WT mice were pretreated with a LXR activator followed by a cell surface biotinylation

assay, we observed significantly elevated levels of biotinylated ABCG1 in DKO macrophages

(Figure 6B). We also performed flow cytometry and observed that only WT macrophages showed

a decreased surface level of ABCG1 with the oxLDL treatment in a clathrin-dependent way (Figure

6C and S10A-C). Therefore, decreased total and surface levels of ABCG1 in WT macrophages

implies that Epsins promote ABCG1 degradation.

We next determined how Epsins cause 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 (Figure 6D). This suggested that

Epsins bind to ABCG1. Accordingly, we showed that Epsin interacted with ABCG1 through the

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

(Figure 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 (Figure

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

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

To confirm 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 (Figure 5J). We observed reduced gene (Figure

5K) and protein (Figure 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 (Figure 5A, 5B and 5D-5I). These studies

demonstrated that Epsin deficiency in macrophages specifically enhanced ABCG1-mediated

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

cardiovascular disease[34]. In accordance, immunostaining of human patient aortic arch (Figure

S11A) and mouse aortic root (Figure 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 CD36-mediated lipid uptake and promote 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

[54] modified with a lesional macrophage-specific targeting peptide (S2P) for systemic delivery of

Epsins 1 and 2 siRNA combinations (S2PNP-siEpsin1/2) (Figure 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 (Figure 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 (Figure S13A and

S13B).

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

Figure 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

(Figure 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 (Figure 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 (Figure S14C and S14D). *En face* ORO staining in aortas, aortic roots, and

brachiocephalic artery (BCA) sections (Figure 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 (Figure 7D), increased elastic fibers and collagen content

(Figure S15), and reduced necrotic core area (Figure 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 (Figure 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 [61]. This model mimics LDLR null mice

[26] and requires no genetic modification [61]. 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 (Figure 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 (Figure 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 (Figure 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 (Figure 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), intercellular adhesion molecule-1 (ICAM-1), P-

selectin or E-selectin (Figure 8E-8I) 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

(Figure 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 (Figure 8J). These decreased pro-inflammatory cytokines lead to reduced

ICAM-1, VCAM-1, P- and E-selectins expression in ECs (Figure 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 discovered that Epsins 1 and 2 govern cholesterol transport (Figure S18) in

atherosclerotic macrophages by regulating CD36-mediated lipid uptake (Figure 1-3 and S1-S6)

and ABCG1-dependent cholesterol efflux (Figure 4-6 and S7-S11). Importantly, we

demonstrated that targeting lesional macrophage Epsins using a newly developed

nanotechnology-based siRNA-mediated therapy halts inflammation, impedes early and late

atherogenesis (Figure 7 and S12-S16), and accelerates atheroma resolution (Figure 8 and S17).

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

atherosclerotic lesions and marked attenuation in inflammation (Figure 7 and Figure 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 [62-64]; 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 [7-10].

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

[65,66]. 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 (Figure 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 (Figure 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 [26] given that efferocytosis plays a central role in regulating

necrotic core formation [67-69]. Despite the fact that S2P-NPs have been shown to only negligibly

target the endothelium [54], 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 [24,25]. 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 [70-73], this process is attenuated during atheroma progression, leading to defective

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

vulnerable lesion rupture [70-76]. A recent report suggests that macrophage SR-B1 modulates

autophagy through the VPS34 complex and PPARα transcription of Tfeb in atherosclerosis [77]. 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 [78]. Given that Epsins are implicated in autophagy function in

Drosophila [79], 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 (Figure 6). It is thought that basal

macrophage ABCG1 is largely located at an intracellular location [80] and then redistributed to the

cell surface following LXR activation [81]. Our immunostaining and biotinylation studies (Figure 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 (Figure 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) [39-41]. In addition, cholesterol efflux capacity

has minimal links to various risk factors and metabolic issues in contrast to HDL cholesterol level

[45]. Our results show that targeting Epsins augments cholesterol efflux (Figure 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.

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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. R.Z., 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

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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.,

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Figure 1

Figure 1. scRNA-seq data revealed down-regulation of cholesterol-related cell-cell

communications mediated by metabolites and their sensor proteins in macrophage

subpopulations in DKO aorta compared to WT. (**A**) UMAP plot of cell clusters in WT and

DKO aorta. Macrophage populations are indicated in the red circle. (**B**) UMAP of subclusters of

macrophage populations in (A). Trajectory inferred by Monocle3 was displayed. (**C**) A barplot

showing the number of communication events in cell groups in WT and DKO. (**D**) A circle plot

showing the differential communications between cell groups in DKO compared to WT. The

arrows indicate directions of communication from sender cells to receiver cells. The size of nodes

positively correlates with the number of connected nodes. Line colors indicate the difference in

communication scores of DKO compared to WT. (**E-F**) A flow plot of communications

comprising senders, metabolites, sensors, and receivers from macrophage subpopulations to all the

cell types (E); and from all cell types to macrophages (F). (**G**) Violin plots of the abundance of

representative metabolites and sensors across cell types in WT and DKO. Metabolite abundance

(upper), sensor abundance (below). (**H**) A heatmap showing the most variable communications

related to cholesterol metabolism in macrophages in the comparison of WT and DKO aorta.

Figure 2

Figure 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

Figure 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$^{\Delta ENTH}$ or FLAG-Epsin1$^{\Delta UIM}$) 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$^{\Delta UIM}$ 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$^{\Delta ENTH}$, and FLAG-Epsin1$^{\Delta UIM}$ 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 Figure S6), n=6, **Epsin1 ^{WT} vs vector group, P<0.01; ##Epsin1$^{\Delta UIM}$ 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

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

indicate inverse 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

Figure 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 were incubated in the presence or absence of HDL (25μg/mL) and

ApoA-1 (10μg/mL) in the presence of 3μmol/L LXR agonist T0901317 (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

Figure 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$^{\Delta ENTH}$ or FLAG-Epsin1$^{\Delta UIM}$) 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$^{\Delta ENTH}$ 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).

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Figure 7

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Figure 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

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Figure 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 Supplemental Materials

Targeting Epsins by nanotherapy regulates lipid metabolism and promotes

ABCG1-mediated cholesterol efflux to fortify atheroma regression

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<u>**The supplemental materials include:**</u>

Materials and Methods

Figure S1. Cell populations were annotated based on marker gene expression.

Figure S2. Cell proportion changes for each cell type in WT and DKO.

Figure S3. RNA-seq analysis of WT and DKO macrophages reveals that Epsins regulate lipid

cholesterol metabolism and efflux pathways.

Figure S4. Gating strategy and clathrin-mediated CD36 internalization.

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

Data file S1. Differentially expressed genes between cell clusters identified in all the cells in aorta.

Data file S2. Differentially expressed genes between macrophage subclusters.

Data file S3. Differentially expressed genes in DKO compared to wild type.

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

Data file S5. Gene differential expression analysis between ABCG1KO and wild type

macrophages.

Data file S6. Gene Ontology enrichment analysis for DEGs in ABCG1KO compared to wild type.

Data file S7. Gene Ontology enrichment analysis for pathways reversely regulated by ABCG1KO

and DKO.

Data file S8. Uncropped Western Blot.

Data file S9. Primary data of statistical analysis.

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MATERIALS and METHODS

Isolation of primary mouse macrophage and macrophage culture

The isolation of peritoneal macrophages was performed as described previously [82]. 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% Pen-Strep) 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% Pen-Strep) 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 Supplemental 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) [83] or TopHat (version v2.1.1) [84]. The read count was calculated for

each gene by htseq-count (version 0.11.2) [85] 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)

[86]. 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) [87]. 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 heatmap (version 1.0.12). Gene Ontology (GO) functional enrichment

analysis was performed by the R package clusterProfiler (version 3.18.1) [88].

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. [59], with the accession number

GSE139439, downloaded from NCBI GEO database [89]. The overlapping DEGs co-regulated in

DKO and CD36 knockout macrophages were analyzed by the R package VennDiagram (version

1.6.20) [90]. The statistical significance of overlapping genes was calculated by Fisher exact test. All

the data for bulk RNA-seq are available in Data files (S3-S7).

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[25]. CD36 (lot:52025)

and ABCG1 (lot:53952) plasmids were purchased from AddGene. HEK 293T cells were cultured

in DMEM (10% FBS and 1% Pen-Strep) 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% Pen-Strep). 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 [26]. 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 supplemental materials [26].

ORO staining and 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's, H&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, 5 min 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 min, 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 medium. For foam cells: coverslips were washed with PBS, fixed in 4%

paraformaldehyde for 10 min and stained with freshly prepared 0.5% Oil Red O solution for 10

min 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 medium. Imaging was processed with a Zeiss LSM880 confocal microscope and

analyzed with ZEN-Lite 2012 software and NIH ImageJ software. Quantification of lesion was

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

Hematoxylin and Eosin staining

Frozen aortic root and BCA sections: slides were fixed in 10% buffered formalin for 15 min

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 min 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.

Immunofluorescence 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 min. 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 medium

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 h at room temperature. The

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

BODIPY™ 493/503 staining of macrophages was performed following F4/80-fluorescent

conjugated antibody incubation for 2 hours at room temperature [91]. 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 using 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 in the presence or absence of

clathrin siRNA at 37^0C for different time based on the experiment designs. 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 Supplemental 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 24h 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

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 [26]. 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

Cell surface biotinylation was performed as described previously [26]. 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 [92].

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 [81]. After this

equilibration period, cells were washed twice with warm PBS and incubated in serum free RPMI

medium supplemented with or without cholesterol acceptors (10 µg/mL ApoA-1 or 25 µg/mL

HDL) and 2µg/mL ACAT inhibitor for 4 hours [93]. 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 [94]. 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.

Reverse cholesterol transport (RCT) assay

In vivo RCT experiment is based on the method detailed by Joan Carles Escolà-Gil et al [94].

Briefly, macrophages were radiolabeled with [3H]-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, [3H]-cholesterol-labeled macrophages were detached, spun down and resuspended in PBS.

The injection dose was 0.5 mL per mouse (4×10^6 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%.

Figure S1

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Figure S1. Cell populations were annotated based on marker gene expression. (**A**) Dot plot

of known marker genes for each cell cluster in Figure 1A. Marker gene expression are colored by

red and blue for WT and DKO, respectively. Size of nodes represent percentage of cells expressing

a certain gene. (**B**) Dot plot of known marker genes for each macrophage subclusters. (**C**) Violin

plots showing the representative marker gene expression in each macrophage subclusters in WT

and DKO.

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Figure S2

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Figure S2. Cell proportion changes for each cell type in WT and DKO. The bar plots showing

the cell proportion of M1 macrophage was decreased, while those of M2 macrophage and M1-M2

transition cells were increased in DKO compared to WT.

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Figure S3

Figure S3. RNA-seq analysis of WT and DKO macrophages reveals that Epsins regulate lipid

cholesterol metabolism and efflux pathways. (**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 showing the expression of genes involved

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

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Figure S4

Figure S4. Gating strategy and clathrin-mediated CD36 internalization. (**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 Figure 2C and 2H,

respectively. (**C**) WT and DKO macrophages were incubated in lipid-deficient medium and

transfected with clathrin siRNA for 24h followed by treatment with or without 100μg/mL oxLDL

for 15 mins at 37^0C. Flow cytometry for surface level of CD36.

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Figure 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.

Figure S6

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1412 **Figure S6. Transfection of full-length Epsin1 and constructs with the ENTH and UIM**

1413 **domains deleted into WT macrophages did not affect lipid uptake.** Constructs of FLAG-

1414 Epsin1 WT, ΔENTH, and ΔUIM were transfected into ApoE$^{-/-}$/WT macrophages for 48h and

1415 treated with 100 μg/mL oxLDL for 1h, followed by staining with F4/80 (red), BODIPY (green)

1416 and DAPI (blue). Scale bars=200μm. Statistical analyses are presented in Figure 3E.

Figure S7

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Figure 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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Figure S8

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Figure 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 Na_2SO_4. 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.

Figure S9

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1439   **Figure S9. Gene expression levels of indicated genes in WT and DKO macrophage.** Peritoneal

1440   macrophages were isolated from WT (n=5) and DKO (n=5) mice. Total RNA was extracted and

1441   mRNA levels of ABCG1, Epsin1, and Epsin2 were measured (NS=no significant difference, **

1442   WT vs DKO group, n=5, P<0.01). Data are presented as mean ± SD and analyzed using an

1443   unpaired Student's t-test.

Figure S10

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Figure S10. Gating strategy and clathrin mediated-ABCG1 endocytosis. (**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 for Figure 6C. (**B**) Statistical analysis is

presented for Figure 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. (**C**) WT and DKO macrophages were incubated in lipid-deficient medium and

transfected with clathrin siRNA for 24h followed by treatment with or without 100μg/mL oxLDL

for 15 mins at 37^0C. Flow cytometry for surface level of ABCG1.

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Figure S11

Figure 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.

Figure S12

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Figure 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.

Figure S13

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Figure 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.

Figure S14

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Figure 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.

Figure S15

Figure 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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Figure S16

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Figure 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.

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Figure 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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Figure 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
Reagents, 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-	ThermoFisher Scientific	Cat# 18080400

Strand Synthesis SuperMix		
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™ Mouse macrophage nucleofector kit	Lonza	Cat# VPA-1009
Collagenase type I	Gibco by Life technologies	Cat# 1866783
Collagenase type IV	Gibco by Life technologies	Cat# 2383671
Liberase	Roche	Cat# 05401127001
Chromium Next GEM Single Cell 3' Reagent Kits v3.1	10X Genomics	
GEM Single Cell 3'GEM Kit v3.1	10X Genomics	PN-1000123
GEM Single Cell 3'Library Kit v3.1	10X Genomics	PN-1000157
GEM Single Cell 3'Gel Bead Kit v3.1	10X Genomics	PN-1000122
Dynabeads™ MyOne™ SILANE	10X Genomics	PN-2000048
GEM Chip G Single Cell Kit, 48rxns	10X Genomics	PN-1000120
Single Index Kit T Set A, 96 rxns	10X Genomics	PN-1000213
SPRIselect Reagent	Beckman Coulter Inc.	Cat# B23317
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:	This study	N/A

Forward: 5'-TCTATCAGACGGCAGATGAAAAAC-3'

Reverse: 5'-GTCATTGGAGGTGGCCTCC-3'

IL-6	This study	N/A
Forward: 5'-AGTCCGGAGAGGAGACTTCA-3' Reverse: 5'-TTCCACGATTTCCCAGAG-3'		
IL-1beta	This study	N/A
Forward: 5'-GAAGAAGAGCCCATCCTCTG-3' Reverse: 5'-TCATCTCGGAGCCTGTAGTG-3'		
TNF-alpha	This study	N/A
Forward: 5'-ATGAGAAGTTCCCAAATGGC-3' Reverse: 5'-CTCCACTTGGTGGTTTGCTA-3'		
MCP-1	This study	N/A
Forward: 5'-GAAGGAATGGGTCCAGACAT-3' Reverse: 5'-ACGGGTCAACTTCACATTCA-3'		
iNOS	This study	N/A
Forward: 5'-CCCTTCCGAAGTTTCTGGCAGC-3' Reverse: 5'-GGCTGTCAGAGCCTCGTGGCTTTGG-3'		
IL-10	This study	N/A
Forward: 5'-CCCAGAAATCAAGGAGCATT-3' 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		
Mouse clathrin (Picalm) siRNA sequence	ambion	Cat#AM16708
GGAGAUAUUCCAGAUCUUUtt		
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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