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2 Mediator 1 ablation induces enamel-to-hair lineage conversion through enhancer

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26 Short title: *Med1* controls ectodermal lineage

ABSTRACT

Adult stem cell fate has been postulated to be primarily determined by the local tissue microenvironment. Here, we found that Mediator 1 (Med1) dependent epigenetic mechanisms dictate tissue-specific lineage commitment and progression of dental epithelial stem cells. Conditional loss of *Med1*, a key component of the Mediator complex linking enhancer activities to gene transcription, provokes a tissue extrinsic lineage shift, causing hair generation in the dental environment. Mechanistically, we found that Med1 establishes super-enhancers that control enamel lineage driven transcription factors in control dental stem cells and progenies. However, *Med1* deficiency ablates this epigenetic circuit and causes a switch from the dental epithelial transcriptional program towards hair and epidermis on incisors *in vivo,* and in dental stem cell culture *in vitro*. *Med1* loss also provokes an increase in enhancers and super-enhancers near epidermal and hair genes. Interestingly, control incisors already exhibit enhancers near hair and epidermal key transcription factors; these expand in size and transform into super-enhancers upon *Med1* loss indicating that these epigenetic mechanisms cause the transcriptomic and phenotypic shift towards epidermal and hair lineages. Thus, we propose a role for Med1 as safeguard of the tissue-specific epigenome during adult stem cell differentiation, highlight the central role of enhancer accessibility and usage in adult stem cell lineage and provide new insights into ectodermal regeneration.

INTRODUCTION

Postnatal cell fate determination of multipotent adult stem cells is controlled by selective transcriptional programs, that are coordinated by an underlying epigenetic machinery and tissue intrinsic microenvironments[1-4]. Ectoderm derived epithelial stem cells can evolve into multiple lineages and depending on their homing tissue, stem cells differentiate into enamel forming dental lineages, or to hair and epidermis generating skin epithelia[5-7]. Intriguingly, adult stem cells often retain an inclination to their tissue of origin *in vitro* as well as their differentiation potential often reflects their provenance in culture[3,8,9]. Thus, although multipotent adult stem cells have the potential to differentiate into different cell clades, they are endowed with tissue-specific potency[8]. To date, the mechanisms controlling tissue-specific stem cell differentiation are yet not fully understood, and accordingly, the factors safeguarding tissue selective dental or epidermal cell fate determination are still largely elusive. Understanding these mechanisms is also crucial for our efforts in combating diseases like alopecia, ectodermal dysplasia or tooth loss as it might create new entry points for the development of bioengineering strategies for the regeneration of tissues like tooth enamel and skin hair, which has been challenging[7].

The mouse incisor provides an excellent model system to study adult stem cell fate. Dental epithelial stem cells (DE-SCs) residing in the cervical loop (CL) at the proximal end of incisors support the continuous growth of the incisors throughout the lifespan of a mouse. They regenerate the enamel organ by giving rise to all the dental epithelia such as enamel matrix producing ameloblasts, Notch1 regulated stratum intermedium (SI) and others[10-15].

Skin epithelia derived from the same ectoderm are divided into the interfollicular

epidermis and hair follicles during embryonic stages of skin formation[6]. Postnatally, hair

follicle stem cells residing in the bulge region of hair follicles regenerate hair in skin[16,17].

Hair follicles are essential for hair growth and regeneration in mammalian skin and are

characterized by a complex multilayered bulb structure containing the outer and inner root

sheath, medulla, and cortex[18,19]. Following the initial developmental cycle, hair is

maintained by hair follicle cycling in mice, characterized by an anagen phase during which

the hair follicle expands, followed by a transitional catagen phase, leading to the involution

of the hair follicle, and telogen, the resting phase. The cycle then begins a new in

response to signals from the dermal papilla, a specialized mesenchymal cell attached to

the proximal end of the hair bulb[20,21]. The shift between these phases involves substantial

changes in gene expression patterns, which can be activated by injury. For example, hair

depilation induces new hair growth by stimulating anagen with induction of gene

expression such as those encoding hair keratins[22].

Several transcription factors (TF) and pathways have been shown to induce dental

as well as hair and epidermal cell differentiation. For example, paired like homeodomain

2 (*Pitx2*)[23] or *Nkx2-3*[24] *Isl1*[25] are implicated in embryonic enamel epithelial homeostasis[7]

while TFs and signaling genes including HR lysine demethylase and nuclear receptor

corepressor (*Hr* or *also called hairless*) and Ras and Rab interactor 2 (*Rin2*) are important

in controlling hair differentiation because their mutation causes alopecia (hair loss)[26,27].

On the other hand, AP1 factors (*Fos/Jun*) and the tumor proteins of the p53 family

members including *Tp63* are crucial to direct postnatal epidermal differentiation in the

skin[19]. However, the check point factors controlling dental vs epidermal cell fate are still

largely elusive.

We have shown before that Mediator 1 (Med1) controls dental[28-30], and epidermal

cell fates[28,31-34]. Med1 suppression also hinders invariant natural killer T cell

development[35] and prevents luminal cell maturation in the mammary epithelia in mice[36,37].

These data suggest a role for Med1 in controlling tissue-selective adult stem cell lineage

commitment.

Med1 is a key subunit of Mediator complex, which facilitates gene transcription by

linking enhancers to the RNA polymerase complex at transcriptional start sites (TSS) in

gene promoters. Med1 has been shown to localize at typical enhancers (TE) and super-

enhancers (SE) which represent distal regulatory elements recognized as key epigenetic

hubs to determine cell identity and properties[4,38]. As such, the Mediator complex

facilitates the expression of cell fate driving transcription factors and genes in somatic

cells[4,38]. Removal of the Med1 subunit abolishes transcription of genes[39], but the exact

role of Med1 in the Mediator complex is still not fully understood as studies indicate that

Med1 is dispensable for Mediator complex formation[39].

In the present study, we investigate the role of Med1 in governing ectoderm lineage

determination using a conditional knockout (cKO) mouse model in which *Med1*

expression is deleted from ectoderm derived epithelial cells. Med1 ablation provokes a

tissue extrinsic lineage shift, causing ectopic hair growth on incisors. Using an integrative

multi-omics approach, we demonstrate that this intriguing phenomenon is due to a

reshape of the enhancer landscape which causes amplification of ectodermally

conserved distal enhancers linked to transcription factors that control epidermal and hair

lineage commitment and progression.

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Lack of *Med1* in dental epithelia causes ectopic hair without morphogenesis of hair

follicles on incisors.

During postnatal murine tooth maintenance, CL residing dental epithelial stem cells (DE-

SCs) differentiate into Notch1 regulated SI, ameloblasts and other epithelia to mineralize

enamel on the incisor surface (Fig. 1a, top). Intriguingly, deletion of *Med1* from *Krt14*

expressing DE-SCs and progenies provokes a major phenotypical shift in the dental

compartment causing enamel formation to be replaced by unusual, ectopic hair growth

on mouse incisors (Fig. 1b)[28]. As hair growth on the skin depends on multiple cell

populations arranged to form hair follicles (Fig. 1a, bottom), the question arises on how

hair development is achieved in a dental environment. Therefore, we evaluated the

cellular process leading to hair development in *Med1* cKO incisors by comparing it with

physiological hair in skin. Although hair grown on incisors of our mouse model shows an

almost the same hair architecture (cuticles), composition (coat and zig-zag hair) and

morphology as naturally grown skin hair (Fig 1b), hair formation significantly differs on

incisors. In fact, while skin grown hair is regenerated from large anagen follicles in

response to signals from the dermal papilla and maintained by small telogen follicles (Fig

1c, bottom orange arrows), we found that hair is supported by SI derived atypical cell

clusters without typical hair follicle-like structures at 4 wk of *Med1* cKO incisors (Fig. 1c

dotted lined region, and Suppl. Fig. 1c-e), when hair is first visible. These abnormal cell

clusters were originated from disorganized SI layer (Suppl. Fig. 1b red arrows) that are

progressed into expanded papillary layers (Suppl. Fig. 1c) to form hair bases in

mesenchymal tissues (Suppl. Fig. 1e). Hair differentiation was conducted by Notch1

positive SI/SR derived papillary cells form unusual cell aggregates and express the hair

marker keratin 71 (*Krt71*) at 4wk at maturation stage (Suppl. Fig 1d). Later at adult stages

after 3 months, these aggregates formed aberrant pocket-like structures (Fig. 2a).

Although these Notch1 expressing SI/SR derived cell clusters give rise to hair growth and

are rich in hair Krt71 expressing cells as well as in cells expressing the epidermal marker

Loricrin (Lor) (Fig. 2 a, b), the spatial organization of these cells is scattered and randomly

distributed (Fig 2b two left panels, blue arrows). This clearly differs from the well-defined

cellular framework found along hair follicles and on the surface of interfollicular epidermis

in the skin (Fig 2b, right panels, orange arrows). Furthermore, hair depilation on skin

initiates the hair follicle cycle by stimulating the growth of hair follicles (anagen) (Fig 2c

left 3 panels, blue arrows) and inducing the expression of *Krt31* (Suppl. Fig. 2a tooth). In

contrast, dental hair depilation did not activate any follicle-like structures in the hair

supporting tissues on *Med1* null incisors (Fig 2c two right panels, blue arrows) in either

distal or proximal incisor regions (Suppl. Fig. 2b) nor is the induction of the hair marker

Krt31 (Suppl. Fig 2a). Nevertheless, hair grows back at its original length 12 days after

depilation in *Med1* cKO incisors (Fig 2d blue arrows), as occurs in normal skin (Suppl.

Fig. 2c).

These results demonstrate that hair can grow and is regenerated through SI

derived dental epithelia in a skin-extrinsic environment even in the absence of well-

organized hair follicle structural features (Fig. 2e) and without activation of the hair cycle.

Expression of hair and epidermal markers in the hair generating cell aggregates further

indicates that the presence of certain transcriptional patterns allow for the generation of

hair via a primitive cellular environment.

Med1 deficiency is sufficient to switch the dental transcriptional program towards

hair and epidermis in incisors *in vivo*.

Cell identity and cell lineage progression tightly associate with a timed expression of

specific gene-sets. As loss of *Med1* causes hair growth in the dental compartment, using

total gene expression datasets we investigated the expression patterns of epidermal and

hair related gene sets at distinct anatomical locations of mouse incisors in *Med1* cKO

incisor (Fig. 3a, diagram). Our analyses revealed that compared to control mice, in *Med1*

cKO mice certain epidermal genes are already induced in the DE-SCs containing CL

region at 4 weeks of age (Fig 3b left panel, blue dotted box). Subsequently, as DE-SCs

differentiate towards the secretory (Sec) and maturation (Mat) stages, expression of many

epidermal genes strongly increases in *Med1* deficient tissue (Fig 3b). Intriguingly, hair

related genes are not yet detected in the CL locus but become clearly upregulated

downstream in the Sec and Mat regions (Fig 3b right panel). Immunostaining confirmed

the sequential induction of epidermal and hair markers as the epidermal markers Lor and

Krt1 were detected at secretory stage[29] but Krt71 was expressed only at maturation stage

(Suppl, Fig. 1d). These data illustrate how the expression of selected gene-sets during

dental hair development in cKO mice parallels embryonic and postnatal skin development

in wild type mice where epidermal development occurs first (E15), followed by hair follicle

formation (E18) (Fig. 3c). These results demonstrate that *Med1* deficiency is sufficient to

implement epidermal and hair related transcriptional programs priming dental stem cells

towards skin epithelial differentiation *in vivo*.

Loss of *Med1* causes epidermal differentiation of DE-SCs *in vitro*.

As the local microenvironment significantly influences adult stem cell differentiation *in*

vivo[3,6,9], the question arises as to the cellular and molecular mechanisms enabling the

tissue extrinsic differentiation shift of DE-SCs upon loss of *Med1*. To investigate this

phenomenon, DE-SCs containing CL tissues were dissected from 8-10 weeks old control

and *Med1* cKO mice and digested, then subsequently cells were plated and cultured until

self-renewing stem cell colonies formed *in vitro* (Fig. 4a). An enhanced proliferation rate

was observed for the *Med1* deficient cells as shown by the increased number of BrdU

positive cells as well as by the generation of larger colonies (Fig. 4b, cKO). Confirming

and expanding these results, IPA (ingenuity pathway analysis) of whole transcriptomic

data from these cultures not only revealed an upregulation of cell growth and proliferation

related pathways in *Med1* null cells, but also showed that these cells spontaneously

differentiate into the epidermal lineage in monolayer (Fig. 4c, d), even if the cell culture

was lacking mesenchymal feeder cells to induce epidermal differentiation. In fact, like Sec

tissue from cKO mice, an extensive set of epidermal related genes are clearly upregulated

in cultured *Med1* null DE-SCs as well (Fig. 4d). Of note, in line with our *in vivo* data above,

genes related to hair differentiation are only partially induced *in vitro*, suggesting that full

hair differentiation requires additional external processes. Furthermore, IPA analysis also

identified members of the p53 family (Tp63/53/73) as top upstream inducers of epidermal

differentiation (Fig. 4e) that are linked to the key epidermal AP-1 transcription factors *Fos*

and *Jun* (Fig. 4f). Collectively, these results show that epidermal commitment of *Med1*

null DE-SCs is directed by mechanisms which are independent from factors present in

their homing tissue. In consequence this suggests that upon loss of *Med1*, intracellular

mechanisms intrinsically reprogram the DE-SCs towards interfollicular epidermal

lineages.

Med1 directly regulates the expression of enamel lineage driving transcription

factors by associating with their cis and trans regulatory elements.

As part of the Mediator complex, Med1 associates with promoters and super-enhancers

(SEs), that are postulated to determine cell identity and properties as SEs induce

transcription of cell fate specific genes much higher than typical enhancers (TE)[38]. In our

mouse model, loss of *Med1,* shifts the lineage fate of dental epithelia towards hair

development. Therefore, to better understand the role of Med1 during DE-SC lineage

commitment and progression, we assess the genome wide distribution of Med1 and Med1

containing enhancers during dental epithelial development in control mice (4wk). We then

identify the enamel lineage specific TFs that are controlled by Med1/SE because TFs

primarily specify cell fate and capable to re-program cell lineages. For this purpose, we

performed Med1 ChIP-seq on the stem cell containing head region of the CL (CLH) as

well as on CL tail area (CLT) which includes their progenies (Fig. 5a, diagram). Med1 was

distributed in promoters and enhancers in distal intergenic regions in CLH and CLT (Suppl.

Fig. 3a). Subsequent enhancer analysis identified 325 SEs in the CLH region and 871

SEs in the CLT (Fig 5b, Suppl Fig 3b). These analyses identified a list of TFs (Fig 5d), in

which Med1 is recruited in their SEs. In the CLH tissues, SE locate near enamel lineage

TFs including *Pitx2*, *Isl1, and Nkx2-3* (Fig 5b left panel, Fig 5c left 3 panels). In contrast,

in CLT samples, SE are found around key TFs like Satb1 homeobox 1 (*Satb1)* and Runx

family transcription factor 1 (*Runx1*) and 2 (*Runx2*) which control later cellular processes

like differentiation and enamel mineralization (Fig. 5b right panel, Fig 5c right 3 panels).

Of note, the mRNA expression levels of these TFs are strongly reduced *Med1* cKO at

CLT (Fig. 5e), indicating their essential role for enamel formation because *Med1* null mice

show severe enamel dysplasia. In addition, Med1 levels are strongly enriched around the

promoters of these TFs while mature ameloblast markers shows only a slight increase in

Med1 levels when compared to the average of the genes. These results indicated that

Med1 directly activates these enamel fate TFs rather than supporting late differentiation

(Suppl Fig 4a). Intriguingly, we also found Med1 is recruited into enhancer region (SE or

TE) for another set of TFs (Fig. 5f), which are up regulated upon *Med1* loss in CLT tissues

(Fig. 5g). This set consists of genes involved in epidermal differentiation of the skin

including early growth response (*Egr3*), CCAAT enhancer binding protein β (*Cebpb*), Fos

like 2 (*Fosl2*) (AP-1 transcription factor subunit), Kruppel like factor 3 (*Klf3*), Forkhead box

C1 (*Foxc1*), *Foxo3*, tumor protein Tp63, and hair fate driving factors like *Hr* and *Rin2*.

These data indicate that Med1 programs DE-SCs and their progenies to commit and

progress enamel lineage through critical TFs (Fig 5d). Lack of *Med1* may initiates

developmentally related epidermal fate presumably through epidermal driven TFs

enhancers (Fig 5f) that are present dental epithelia.

Med1 deficiency reshapes the enhancer landscape in DE-SCs and their progenies.

As loss of *Med1* inhibits the expression of Med1 associated enamel lineage driving TFs

but induces epidermal TFs in CL tissues, we next probed if this is linked to changes in

promoter and enhancer patterns upon loss of *Med1*. To test this hypothesis, we

performed ChIP-Seq analysis against the alternative enhancer marker histone 3 lysine

27 acetylation (H3K27ac) in CLH and CLT tissues of 4-week-old *Med1* cKO and their

littermate control mice (Fig. 6a). H3K27ac generally co-localizes with Med1 at distal

regulatory elements like typical enhancers (TE) and SEs and acts as a major inducer of

gene expression by increasing chromatin accessibility[38,40] as we have confirmed (Suppl.

Fig 4b). GREAT based GO analysis evidenced that in the CLT region, differential

H3K27ac peaks were associate with genes linked to enamel mineralization and tooth

morphogenesis (Fig. 6b blue bars), and epidermal and hair development (yellow bars).

We also found that these H3K27ac peaks are recruited in promoter regions for hair

lineage genes, epidermal genes in cKO in both CLT and CLH (Suppl. Fig. 5a). In contrast,

Med1 deletion substantially increases the number of H3K27ac SEs (Fig. 6c) and TEs

(Suppl. Fig. 4c) in both, CLH and CLT. These new TEs and SEs are found around loci

coding for epidermal genes while in CLT tissues we observe an increased TE and SE

formation around hair lineage driving genes as well (Fig 6d), that are upregulated in Med1

cKO. For example, new H3K27ac marked SE was formed in epidermal driven Fosl2 (Ap-

1 factor) loci in cKO (Fig 6d blue bar in boxed region), linking to its mRNA induction in

Med1 cKO (CLT) (Fig 5g), in which the locations of SE and TE are separately shown

(Suppl. Fig 5b). Moreover, when compared to the conserved and the newly formed SE at

CLT, GO terms show relatively low significance, suggesting that loss of Med1 increases

and expands SE occupancy around loci with pre-existing SEs (Suppl. Fig 4d).

Corroborating these results in line with our results from Fig. 4, we also found that the TF

binding motifs for the epidermal inducible TFs Tp53/63, Egr1 and AP-1 are significantly

enriched in cKO SEs compared to controls at CLT (Fig 6e). Collectively, loss of *Med1*

alters the epigenetic landscapes in DE-SCs and their progenies which are linked to

biological processes and pathways upstream of or extrinsic to DE-SCs and their

progenies. Our analyses also identify Med1 as check point factor which allocates lineage

specific epigenetic for ectoderm epithelia.

Lack of *Med1* leads to H3K27ac signal amplification at epidermal and hair loci with

common occupancy profiles.

Our results implicate that Med1 cKO utilizes developmentally conserved epidermal

enhancers present in dental epithelia. As dental and skin epithelia are derived from the

same ectoderm, we tested if two populations share common enhancer profiles around

epidermal and hair driven TFs. We found that even though dental epithelia usually do not

commit to epidermal fates, enhancer profiles are very similar round several key hair and

epidermal TFs in dental and skin epithelia. For examples, H3K27ac broad peaks

representing TE were present in control dental cells for epidermal fate driven Fols2 (Ap-

1 factor) (Fig. 7a red arrows, Suppl. Fig 5b), hair factors Hr (hairless) and Rin2 (Suppl.

Fig 5c). These enhancers were even shared in epidermal keratinocytes that were isolated

from normal mouse skin (10wk, telogen) (Fig 7a, b green), as well as in hair follicle

transient amplifying cells driving hair differentiation[41] (Fig 7a, b light blue, Suppl. Fig 5c

yellow). Similar results were obtained for other epidermal TFs, *Cebpb, Foxo3* (Suppl. Fig

6a) in which pre-existing TE/SE are expanded in cKO. In addition, enhancers were widely

shared in dental (CLH, CLT) and skin epithelia (epidermis and hair) for most of the *Med1*

cKO upregulated TFs (Fig 7c). Importantly, these H3K27ac marked enhancers were

elevated and upgraded into transcriptionally active SEs or expand in size (CLT, Fig 7a, b

SEs shown by blue bars, Suppl. Fig 6a) when *Med1* is lost.

Integrative analysis of H3K27ac Chip-seq data with RNA-seq based gene-set enrichment

analysis (GSEA) for CLH and CLT tissues (Suppl. Fig 7a) allowed us to further link the

epigenetic and transcriptional changes which lead to ectopic hair generation on incisors

upon loss of *Med1*. In addition to dental related components (Suppl. Fig 7d) and skin

epidermal differentiation genes (Suppl. Fig. 7e), we observed positive expression

enrichments for gene-sets involved "hair lineage genes" (Supple. Fig 7b) and negative

enrichments for gene-sets controlling "negative regulation of ossification" (Suppl. Fig. 7a

arrows). Many TFs found around "hair lineage genes" were elevated to SEs upon the loss

of *Med1* in CLT (Fig. 7d and Suppl. Fig. 5c, Suppl. Fig 6b). Intriguingly, these factors

controlling hair lineage were shown to be regulated by SE in the skin before[4]. Besides the

generation of new SEs, we also found a strong increase in H3K27ac levels around the

promoters (+/- 10kb from TSS) of these genes (Fig. 7e) in *Med1* null CLT tissues

potentially indicating activation of gene transcription via enhancer-promoter looping. In

fact, enhanced H3K27ac promoter levels positively correlate with an increased

expression of several members of the "hair lineage genes" (Fig. 7f) further confirming the

link between the generation of new SEs, activation of the SE-dependent hair lineage

genes and hair growth on *Med1* null incisors. Accordingly, in *Med1* cKO CLH tissues,

increased H3K27ac promoter levels positively correlate with an elevated expression of

genes involved in "negative regulation of ossification" (Suppl. Fig. 6c) and H3K27ac

occupancy increased in ossification regulated TFs of *Sox9* and *Tob1* loci in their

enhancers (Suppl Fig 6a). This further corroborates the dental phenotype of our mouse

model which is not only characterized by hair growth but also by enamel dysplasia.

In summary, we propose an epigenetic model in which *Med1* safeguards enamel lineage

specific epigenome in dental stem cells and progenies. *Med1* deletion initiates enamel-

to-hair lineage conversion by expanding the enhancer landscapes which causes the

formation of new SEs around hair and epidermal driven genes. These observations

positively correlate with an increased expression of hair and epidermal lineage driving

factors leading ultimately to hair development in dental tissues.

DISCUSSION

Adult stem cell fate is heavily linked to their tissue of origin[2,3,9]. It is postulated that the

local cellular and endocrine microenvironment primes and directs tissue specific lineage

commitment and differentiation via cellular, transcription and epigenetic mechanisms[2,4].

Here we show that deletion of *Med1*, a key component of enhancer associated Mediator

complex, causes ectopic hair growth on incisors. Unlike hair growth in the skin which

relies on functionally structured follicles, hair is generated from primitive, cellular

aggregates without hair follicle morphogenesis in a dental cellular environment.

Furthermore, as shown by our depilation experiments, dental hair regrows without

induction of the hair cycle, a follicle dependent process required for regeneration of hair

in the skin. Thus, our results question the current knowledge that mammalian hair can

only be generated from hair follicles consisting of multiple cell layers bearing bespoken

functions. In addition, our study also illustrates how deletion of Med1 induces an atypical

differentiation program in an extrinsic environment *in vivo*. Despite the cellular

agglomerates causing hair growth on incisors exhibit a scattered cellular setup, the mRNA

expression profiles found in these structures mimic those of dedicated hair and epidermal

cells found in skin epithelia. Thus, while Med1 negative DE-SCs reside in the dental

environment, they are driven towards lineages characteristic for skin epithelia.

Interestingly, loss of Med1 leads to differentiation into epidermal lineages in SI derived

cells, implicating their multi-potency of SI cells consistent to a previous study [42].

Lineage commitment and differentiation are orchestrated by epigenetic programs

and regulatory elements including TEs and SEs [4,38,40]. Our results elucidate that already

at early dental differentiation stages Med1 containing SEs selectively populate genomic

loci coding for enamel fate driven TFs in DE-SCs and their progenies. This outlines how

Med1 controls and programs enamel epithelia's differentiation at multiple stages as it

primes DE-SCs towards the dental lineage via activation of *Nkx2-3, Pitx2* and *Isl1* and

calibrates lineage progression of DE-SC progenies by regulating the expression of

Runx1/2 and *Satb1.* These findings are consistent with previous studies that *Nkx2-3*

controls cusp formation in embryonic dental epithelia[24], and *Nkx2-3, Pitx2 and Runx2* as

essential for dental development[24,43,44]. *Isl1* is required for patterning and mineralization

of enamel[25], Runx2 for enamel mineralization [45,46], and *Satb1* for cell polarity and enamel

matrix secretion in amelogenesis[47].

Intriguingly, although Med1 is a well-recognized SE component, loss of *Med1* in

CL tissues does not compromise SE formation but significantly widens the genomic

enhancer landscape instead. In the dental setting, this does not increase the potency on

DE-SCs but rather drives these cells into epidermal linages. This coincides with a shift in

the SE profiles around loci coding for TFs like *Hr* (hairless) and *Rin2* which are essential

for hair formation[26,27] as well as *Egr1/3, CEBP/a*, *CEBP/b*, and *Fosl2* which control

epidermal differentiation at different stages[48,49]. Furthermore, our data show that the

Med1 null SE are enriched in Tp63/53 binding sites. They are master regulators for the development of stratified epithelia *in vivo*[19] and drive epidermal differentiation of *Med1* null stem cells *in vitro*. In fact, *Med1* null mice activate Tp63 driven epidermal differentiation in the skin, in which epidermal markers and lipids are accumulated in upper hair follicle keratinocytes resulting in hair loss[28].

Building on our previous studies[29], these results elucidate a central role for Med1 in assuring tissue specific lineage differentiation of adult stem cells into enamel producing dental epithelia. Our results also reveal that basal H3K27ac levels are already found at hair and epidermis driven TFs related loci in control DE-SCs suggesting that a basal epigenetic memory granting multipotency is already established in pre-occurring ectoderm during embryonic development. Consequently, in post-natal tissues, Med1 guarantees adult stem cell commitment and differentiation into tissue intrinsic lineages by restricting SE formation to selective and lineage specific loci. In addition, as loss of *Med1* causes DE-SCs to differentiate into a developmentally related lineage might indicate that DE-SCs trans-differentiation into lineages originating from different germ layers would probably need overcoming of more strict and embryonically set epigenetic barriers[38].

Hair as well as enamel are tissues which under certain conditions are difficult to regenerate. A deep understanding of the cellular and epigenetic mechanisms controlling the formation of these tissues creates new entry points for the development of strategies to combat skin, hair, and tooth related diseases. Our results establish that hair formation is achievable in tissue other than the skin, even without the presence of hair follicles. Similarly, hair was also accidentally generated by DE-SCs transplanted into renal capsules during an effort to regenerate enamel[50]. This suggests that hair could be

generated via genetically engineered cell clusters or organoids *in vitro* which might be

easier than traditional strategies and bypass time consuming re-programming processes.

This would be of great benefit as it would greatly simplify *in vitro* hair generation and allow

hair growth without hair follicles which are very challenging to regenerate[51]. Similarly,

enamel regeneration might also be feasible by using foreskin derived epidermal stem

cells. In fact, cultured epidermal stem cells derived from skin have been shown to

differentiate into functional ameloblasts *in vitro*[52]. Overall, these findings, elucidate novel

possibilities to develop strategies to overcome hair and enamel associated diseases.

MATERIALS AND METHODS

Krt14-driven *Med1* cKO mice

Conditional *Med1* knockout (cKO) mice were generated as described previoulsy[28]. Floxed

(exon 8-10) *Med1* mice[53] (C57/BL6 background) were mated with keratin 14 (Krt14)

promoter driven *Cre* recombinase mice (The Jackson Laboratory, C57/BL6 background).

Genotyping was performed by PCR as previously described[28] and *Cre* negative littermate

mice served as controls (Ctrl). All the experiments were approved by the Institutional

Animal Care and Ethics Committee at the San Francisco Department of Veterans Affairs

Medical Center.

Histological analysis

Mouse mandibles were dissected from *Med1* KO and littermate control (CON) mice and

fixed in 4% paraformaldehyde at 4°C for overnight and decalcified in 0.5 M EDTA for two

weeks. Subsequently they were dehydrated and embedded in paraffin wax using

standard protocols. The whole mandible was then serially sectioned at 7 μm (sagittal

sections) containing both the CL and enamel organ. Ultimately, slides were stained with

hematoxylin and eosin (HE) and imaged with brightfield microscopy.

Immunostaining

For immunostaining, paraffin embedded jaw sections were treated with antigen

unmasking solutions (Vector lab Citrate-based, H-3300) and subsequently blocked with

an avidin/biotin blocking solution (Vector lab, SP-2001) and incubated with primary

antibodies against Krt71 (Covance), Notch1 (Cell Signaling) and Loricrin (Covance). They

were then developed by Vectastain Elite ABC kit (Vector Lab) using DAB staining solution

(Vector Lab, SK-4100) until brown signals were visible. The sections were counterstained

with Gill's Hematoxylin.

Immunofluorescence

Paraffin-embedded mandible sections were pretreated in 10 mmol/L citrate buffer (pH 6.0,

Sigma-Aldrich) for 20 min using a microwave for antigen retrieval. The specimens were

blocked by Power Block (BioGenex) and incubated with primary antibodies against Krt71

(Progen), Krt1, (Covance), Loricrin (Covance) and Notch1 (Cell signaling). They were

subsequently incubated with species specific secondary antibodies conjugated with

fluorescent dyes (Invitrogen Molecular probes), including Alexa 594 (red) and Alexa 488

(green), and counterstained with DAPI. Images were taken with a confocal microscope

(LSM510, Carl Zeiss).

Dental epithelial stem cell (DE-SC) culture

CL tissue was separated from 10 wk *Med1* KO and CON mice, and epithelial tissues were

separated and treated by dispase (5U/ml Stem Cell Technology) to separate

mesenchymal tissues. Epithelial tissues are further dissociated by accutase (Sigma

Milipore), and cells were plated under low density to generate colonies and maintained

with DMEM media supplemented with recombinant EGF 20 ng/ml (R&D), FGF 25 ng/ml

(R&D), 1X B27 supplement (Gibco). After 8 days of culture, number and size of colonies

are evaluated, and RNA is prepared for microarray.

BrdU staining

DE-SC are labeled by BrdU and stained by a BrdU staining kit (Abcam) by following

manufacturer's instruction.

Chromatin immunoprecipitation

Chromatin IP was performed by using the LowCell# ChIP kit (Diagenode) for H3K27ac,

and the iDeal ChIP-kit (Diagenode) for Med1 according to the manufacturer's protocols

with some modifications as described below. Dissected CLH or CLT tissues were cross-

linked with 1% paraformaldehyde for 8 min (H3K27ac) or for 15 min (Med1) and

subsequently quenched with 0.125M glycine. Epidermal keratinocytes containing stem

and proneny were isolated from mouse skin were fixed with 1% paraformaldehyde for 10

min. Chromatin was then sonicated with a Covaris S2200 ultra-sonicator (Covaris, Inc.)

to obtain DNA fragments with an average length of 300±50 bp. The fragment size was

verified with an Agilent 2100 Bioanalyzer (Agilent Technologies). Sheared chromatin was

thereafter immunoprecipitated with Protein A-coated magnetic beads (Diagenode)

preincubated with 4.5 μg/IP Med1 antibody (Bethyl A300-793A) or 3 μg/IP H3K27ac

antibody (ab4729, Abcam). Chromatin input samples were used as reference. Complexes

were then washed and eluted from the beads with washing buffer and crosslinks were

reversed by incubation with proteinase K at 65°C for 4 hours. Immunoprecipitated DNA

along with genomic DNA (Inputs) were purified using the IPure v2 kit (Diagenode). IP

efficiency was confirmed by qPCR using primers provided in the kits. Experiments were

carried out in duplicates. ChIP-Seq libraries were generated using the Accel-NGS 2S Plus

DNA library kits (Swift Sciences) and amplified by PCR for 11-13 cycles. High molecular

weight smear was removed in the library by right side size selection using SPRI beads

(Beckman Coulter). The libraries were quantified by Agilent 2100 Bioanalyzer with the

high sensitivity DNA assay and sequenced on an Illumina HiSeq 4000 (UCSF Center of

advanced technology) in a single strand 50 bp run.

RNA expression analysis

Total RNA was isolated from 4-week-old total CL, CLH, CLT, Sec or Mat tissues of *Med1*

cKO and littermate Ctrl mice using the Pico Pure RNA purification kit (ABI). RNA from

cultured dental epithelial stem cells was extracted using the RNeasy mini kit (Qiagen).

RNAs were analyzed for quality and purity using the Pico Chip on an Agilent 2100

Bioanalyzer (Agilent Technologies) to meet the processing criteria of the UCLA Genomic

Core facility for the Illumina array platform (Mouse Ref-8 v2.0 Ambion) or RIN score

values for RNA-seq. Microarray data generation and primary microarray data analysis

was described previously [12]. Microarray data was used for differential pathway analysis

with Ingenuity IPA software (Ingenuity) and results were considered significant for *p*-

values less than 0.005. Heat maps were then generated with MeV software using fold

changes (cKO/Ctrl). For RNA-Seq analysis, RNA integrity was analyzed with a 2100

Bioanalyzer with an RNA 6000 kit (Agilent Technologies). RNA-Seq libraries were

prepared using the Illumina TruSeq v2 library preparation kit and sequenced with paired-

end 50 bp reads on an Illumina HiSeq 4000 in biological duplicates.

For quantitative real-time polymerase chain reaction (rt-qPCR), cDNA was synthesized

from ~0.5 µg RNA using the SuperScript III first strand synthesis system (Invitrogen) as

described by the supplier and subjected to rt-qPCR amplification using the QuantiTect

SYBR-Green PCR Kit (Qiagen) and a 7300 or 7500 Real Time PCR system (Applied

Biosystems) using the following conditions: 10 min 95°C followed by 45 cycles of 30 sec

at 95°C, 30 sec at 60°C and 30 sec at 72°C. Relative mRNA levels compared to the

housekeeping gene *Gapdh* and determined with the ΔΔCt method. Primers for the

analyzed genes are provided upon requests. All rt-qPCR assays were performed in

triplicates.

Next generation DNA sequence data analysis

For RNA-Seq data analysis, raw reads were assessed for run quality using fastqc version

0.72 followed by alignment to reference genome (mm10) using RNA STAR Galaxy

version 2.6.0b-1 with default settings. Differential gene expression analysis was

performed using featureCounts Galaxy version 1.6.3 and DESeq2 Galaxy version

2.11.40.2. For ChIP-Seq data analysis, raw reads from Med1 or H3K27ac ChIP-seq

sequencing experiments were assessed for quality using fastqc version 0.72, followed by

mapping to reference genome (mm10) using BWA Galaxy version 0.7.15.1 with standard

settings. Pooled peak calling was performed with MACS2 callpeak version

2.1.0.20140616.0 using broad peak settings and a minimum FDR cutoff of 0.05. Raw-

files for publically available H3K27ac ChIP-Seq datasets from wildtype mice hair stem

cell progenies were downloaded from the NCBI-SRA database (SRR1573273,

SRR1573274) and analyzed as described above. To assess significantly different peak

occupancy between two experimental groups, peak files (MACS2) were analyzed with

DiffBind Galaxy version 2.6.6.4 or 2.10.0. Peak size and location were visualized with IGV

version 2.3.92.MAYO using group auto-scale for comparable visualization of all shown

groups. Peak intensity around TSS (±10 kbp) as well as genomic peak distribution was

assessed with CEAS software (Version1.0.0, Cistrome, Liu Lab). Gene-ontology analysis

for Med1 or H3K27ac distal intergenic cis-regulatory elements was performed using

GREAT version 3.0.0 (Bejerano Lab, Stanford). Super enhancer analysis was performed

using the ROSE package and the software NaviSE. Overlapping TE and SE between the

shown comparisons were assessed with Bedtools (version 2.29) using a minimum

overlap of 50%. Motif analysis (de novo and known) was performed using HOMER

software [32]. Curated gene-sets used for analyses in this study are provided upon

requests.

Reproducibility and statistical analysis

All the experiments using *Med1* cKO and littermate control mice (n=3) were repeated with

at least two litters, and reproducibility was confirmed. The experiments using cultured

dental epithelia were conducted in duplicates for microarray, and reproducibility was

confirmed. Histologic analyses were performed using 2 sections per mouse per each

group of cKO and CON, and representative images are shown. Statistical significance

was calculated using software integrated methods or two-tailed unpaired Student's t-test.

If not differently noted, differences with a *p*-value of less than 0.05 were considered as

statistically significant.

Data availability

The array data were submitted to a public database (GEO/NCBI/NIH

http://www.ncbi.nlm.nih.gov/geo). Data for *Med1* cKO (4wk), are available with accession

numbers GSE50672, GSE50671, GSE50670, respectively under the super-series

GSE50673. We are pending of RNA-seq and ChIP-seq data submission.

AUTHOR CONTRIBUTIONS

Conceptualization: Y.O., R.T., K.Y., S.F., P.D., D.D.B; Methodology: Y.O., R.T., T.N.,

K.Y.; Investigation: Y.O., R.T., T.N., K.Y.; Writing-Original Draft: Y.O. Writing-Review &

Editing: R.T., Y. O., S.F., P.D., D.D.B; Funding Acquisition: D.D.B., Y.O., S.F., K.Y.,

Resources: R.T., K.Y., S.F., D.D.B., Y.O.

DECLARATION OF INTERESTS

The authors declare no competing interests.

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FIGURES

Fig. 1: Loss of *Med1* in dental stem cells causes ectopic hair growth on incisors. a Top**,** Diagrams representing normal dental epithelial differentiation and enamel formation in mouse mandible. CL, cervical loop; Sec; secretory stage; Mat, maturation stage; DE-SCs, dental epithelial stem cells; SI, stratum intermedium. Bottom, Hair is regenerated by hair follicles under cycling regulation of anagen and telogen in skin. **b** Hair growth on *Med1* cKO incisors at 4 weeks of age (top) that has been consistently observed in over 60 generations of *Med1* cKO mice, is compared to normal hair in skin (bottom). **c** Top, H&E sections supporting hair (blue arrows) in *Med1* cKO incisors at 4 weeks of age (dotted lines. Bottom, H&E sections for hair follicles at anagen (top) and telogen phases (bottom) supporting hair in skin. Bars = 25 μm. For (**b, c**), representative images are shown.

Fig. 2

Fig. 2: ***Med1* null incisors develop and regenerate hair without morphogenesis of**
hair follicles. **a** Left, diagram depicting hair generation via pocket-like structures (red) in
Med1 cKO incisors in adult mice. Right, H&E stain to show hair in dental tissues and
immune-staining against hair marker Krt71 (green). **b** Top, immuno-staining of hair
marker Krt71 (green) and Notch1 (red) in the pocket of *Med1* cKO incisors or of Krt71
only (green) in normal skin. Bottom, epidermal marker Lor (green) and Notch1 (red) in
dental tissues compared to Lor (green) and Krt14 (red) localization the skin. Large blue
arrows show auto-fluorescent hair structures. **c** H&E staining sections of skin (orange)
and dental (blue) sections before (0 day) and after hair depilation (3 and 7 days). Small
arrows show hair. Bars = 25 μm. **d** Full hair regeneration 12 days after hair depilation
from *Med1* cKO mice. **e** Schematic representation of cellular process and anatomical
location of dental SI/SR derived dental epithelia that are gradually transformed into
epidermal (pale green) and hair gene expressing (green) aberrant cell aggregates without
hair follicle structures in *Med1* cKO incisors. For all images, representative images are
shown, and reproducibility was confirmed at least in two different litters of *Med1* cKO and
control mice.

Fig. 3: Loss of *Med1* activates epidermal and hair gene expression in developing incisors. a Diagram depicting the anatomical locations in Ctrl and *Med1* cKO incisors. CL, cervical loop; Sec, secretory stage; Mat, maturation stage. **b** Heatmap showing differential gene expressions for epidermal genes (left) and hair genes (right) in *Med1* cKO incisors versus Ctrl at 4 weeks of age. For each gene, fold changes are compared to CL Ctrl; n=3 for all samples and average values for each group are shown. **c** Top, A diagram to show the hair growth (purple), hair genes (blue) and epidermal genes (light blue) are induced at different stages (CL, Sec and Mat) of *Med1* cKO incisors. Bottom, this pattern is synchronized to sequential inductions of epidermal (orange, E15), and hair genes (yellow, E18) arising during embryonic development of the skin.

Fig. 4: *Med1* lacking DE-SCs spontaneously induce epidermal genes *in vitro*. a Dental epithelial stem cell culture from CL tissues. **b** Left, representative brightfield images of DE-SC colonies and BrdU staining in Ctrl and *Med1* cKO. Bar = 10 μm. Right, quantification of colony size and BrdU positive cells/colony are shown as fold changes (cKO/Ctrl); in both comparisons p>0.01. **c** Biological processes associated to loss of *Med1* in DE-SCs as identified by Ingenuity Pathway Analysis (IPA) on microarray gene expression data. **d** Heatmap showing differential gene expressions of epidermal and hair related genes in *Med1* cKO vs Ctrl incisor tissues (CL and Sec *in vivo*) and cultured *Med1* cKO vs Ctrl DE-SCs (third lane) (n=3) for all samples and average values for each comparison are shown. **e** Upstream regulators responsible for biological process induced by loss of *Med1* in DE-SCs as identified by IPA on microarray data as used in (**c**). **f** Mechanistic network for TP53/63 pathways in induced in *Med1* cKO regulating epidermal fate driven AP-1 factors; upregulated genes are in orange and direct relationships are shown by solid lines. Reproducibility was confirmed by two independent cultures, and representative data are shown.

Fig. 5: Med1 directly controls enamel lineage controlling TFs by associating to their enhancers and promoter. a Schematic of isolation of CLH (stem cells) and CLT (progenies) from mouse mandible for Chip-seq using Med1 antibody. **b** Med1 bound enhancer distribution profiles to show SEs for critical TFs (blue circles) with ranking numbers in CLH and CLT. **c** Med1 Chip-seq profiles at CLH (light blue) and CLT (blue) to show the location of SEs (marked by bars with asterisks*) in *Pitx2, Nkx2-3, Isl, Satb1, Runx1/2* loci, in which average profiles of two independent Chip-seq experiments are shown. **d** Med1 SE identified a list of TFs. **e** Most of these TFs were down-regulated in *Med1 cKO* (CLT) in RNA-seq. **f** Another list of Med1 SE/TE associated TFs. **g** These TFs were upregulated in cKO (CLT) shown by RNA-seq, in which average and SD of fold changes (log$_2$FC) of two different litters of *Med1* cKO and control (3 mice each) with statistical significance $p < 0.05$.

Fig. 6: Loss of *Med1* expands the H3K27ac super-enhancer landscape around epidermal and hair genes in CLH and CLT tissues. a Schematic of isolation of CLH (stem cells) and CLT (progenies) from *Med1* cKO and littermate CON mandible for parallel RNA-seq and Chip-seq for H3K27ac. **b** GREAT based GO analysis for differential H3K27ac peaks to elucidate biological process affected by *Med1* loss in CLT tissues. **c** Number of SEs in Ctrl (blue) and KO (pink) to show new SEs after loss of *Med1* in CLH and CLT tissues. Bar charts showing the increase in H3K27ac marked TE and SE after loss of *Med1* in CLH and CLT tissues around genomic loci for the gene-sets for epidermal and hair lineage genes, compared to ones for skin derived keratinocytes. **d** Chip-seq profiles for H3K27ac occupancy for *Fosl2* (Ap-1) gene, in which SEs is marked by underlying blue line. **e** Most enriched TF binding motifs found in SEs formed in *Med1* cKO and Ctrl in CLT tissues with statistical significance log(*p*-values). All the Chip-seq data are average of duplicates conducted in 2 different litters of *Med1* cKO and littermate control mice.

Fig. 7: ***Med1* cKO upgrades pre-existing enhancers to super-enhancer near epidermal and hair lineage driving genes. a, b** Chip-seq H3K27ac profiles of dental stem cells (CLH) and progenitor (CLT) for *Med1* cKO (pink) and CON (blue), compared to ones for epidermal (green) and hair keratinocytes (light blue) from the skin in Fosl2 (**a**) and *Hr* (hairless) loci (**b**). Pre-existing regular enhancers in Ctrl (red arrows) are transformed into SE (blue bars) in *Med1* cKO at CLT. Schematic representations of cell sources are shown (left). **c** Heatmap showing hair and epidermal lineage driving TFs, that are upregulated in *Med1* cKO, share common enhancer profiles between dental epithelia (CLH and CLT) and skin derived epidermal keratinocytes (Epi cells) and hair keratinocytes (hair cells). **d** H3K27ac enhancer distribution profile, in which SEs associated with hair lineage driving gene exclusively found in Ctrl or *Med1* cKO CLT tissues are noted by the gene names (blue circles). **e** Average H3K27ac occupancy profiles around promoters of all genes vs promoters of hair lineage driving factors in CLT Ctrl and CLT *Med1* cKO tissues. **f** Correlation between gene expression and H3K27ac promoter occupancy (TSS +/-30 kb) in *Med1* cKO vs Ctrl CLT tissues for the hair lineage driving gene set. FC, fold change.

Suppl. Fig. 1: Histological and immuno-histological characterization of *Med1* cKO incisor tissue. a Diagram depicting the differentiation stages of mouse incisors including the location of the cervical loop (CL) and the secretory stage (Sec) and the maturation stage (Mat) of dental epithelia. Right, detailed representation of Sec and Mat. **b** Serial sectioning showing progression of abnormal stratum intermedium (SI) development with generation of atypical cell clusters (red triangles) in *Med1* cKO mice. **c** H&E staining to show abnormal expansion of papillary layer in cKO (yellow triangles). **d** Top, immuno-fluorescent visualization of Krt17 (green) and Notch1 (red) and DAPI counterstaining (blue) in SI/stellate reticulum (SR) derived papillary layers at different locations of the Mat stage. Bottom, diagram to show the locations of hair marker expression (green). **e** H&E-stained sections emphasizing the location of hair generating cell cluster found between dentin and bone in *Med1* cKO. SI, stratum intermedium, SR stellate reticulum.

Suppl. Fig. 2: Effects of hair depilation on dental hair regeneration. a Hair marker *Krt31* mRNA expression in CL tissues of *Med1* cKO mice (tooth, left) and in normal skin tissue (skin right) before and 8 days after hair depilation. Representative data of average and SD of relative expression (% of GAPDH) and the statistical significance (n=3, * $p<0.05$). **b** Histological assessment of atypical hair generating cell clusters in *Med1* cKO incisors before and 12 days after hair depilation in proximal and distal region of the mandible corresponding to diagram. **c** Mouse skin shortly after hair depilation and 12 days post depilation, when hair is regrown (arrow) and enlarged image of hair.

a Med1 distribution in genome

b Total number of Med1 enhancers

821

822 **Suppl. Fig. 3: Med1 is distributed in different genomic regions in stem cells (CLH)**

823 **and progenies (CLT).**

824 **a** Relative distribution of Med1 binding at different genomic elements in CLH and CLT Ctrl

825 tissues (left) and shift in Med1 binding at shown elements between CLT and CLH Ctrl

826 tissues (right). **b** Total number of super enhancers (SE) and typical enhancers (TE) in

827 CLH and CLT Ctrl tissues.

Suppl. Fig. 4: Med1 or H3K27ac occupancy dynamics in dental stem cells (CLH)

and progenies (CLT)

a Average Med1 occupancy at promoters (TSS +/- 10kbp) for TFs driving enamel lineage, mature ameloblast markers and all other genes in CLH and CLT tissues. **b** H3K27ac or Med1 marked super enhancer (SE) and typical enhancer (TE) properties in CLH and CLT tissues. Total number of SEs in Ctrl CLH and CLT tissues (top) and overlapping Med1 and H3K27ac SEs and TEs (bottom). We observe that ~65% of H3K27ac SEs colocalize with Med1 SEs and when H3K27ac TEs are included in the overlap, a colocalization of 96-99% between Med1 SEs and H3K27ac SE/TE is obtained. Of note, we only find an overlap of 39% to 54% for TEs in CLH and CLT control tissues. **c** Total number of TEs, in which lost, conserved and new SEs in *Med1* cKO and Ctrl. **d** GREAT based GO-analysis on lost, conserved, and new H3K27ac SEs demonstrated in Fig 6c. Similar GO terms are summarized in common groups; terms defining GO-biological processes are shown on top and mouse phenotype related terms are shown on the bottom.

Suppl. Fig. 5: Genomic H3K27ac occupancy in promoters and enhancers and their

changes in *Med1* cKO. a Average H3K27ac occupancy at promoters (TSS +/- 10kbp)

for enamel lineage driven TFs, epidermal and hair lineage genes, ameloblast and mature

hair markers in CLH and CLT tissues in *Med1* cKO (right panels) and Ctrl (left panels). **b,**

c H3K27ac occupancy around loci of epidermal *Fosl2* (**b**) and hair lineage driving TFs of

Hr and *Rin2* (**c**) in Ctrl and *Med1* cKO CLT tissues as well as in skin derived hair

keratinocytes. In *Med1* cKO CLT tissues, newly generated SEs are marked with asterisks

(*).

b Hair lineage driving factors

Suppl. Fig. 6: *Med1* deletion upgrades existing enhancers. a Chip-seq H3K27ac

profiles around loci of epidermal driven TFs *Foxo3, Cebpb* and ossification inhibitory

factors of *Tob1 and Sox9* that are upregulated in *Med1* cKO. Enhancers expand in size

or heights in *Med1* cKO at CLT. Bars represent SE or TEs. Epi cells, epidermal cells. **b**

H3K27ac SE dynamics for hair lineage driving genes between Ctrl and *Med1* null CLT

tissues shown by the number of SEs for hair lineage genes, that are upregulated in *Med1*

cKO at CLT. **c** Correlation between gene expression and H3K27ac promoter occupancy

(TSS +/-30 kb) in *Med1* cKO vs Ctrl CLT tissues for the gene-set 'negative regulation of

ossification' (blue circles) compared to all the other genes (pale blue).

Suppl. Fig. 7

Suppl. Fig. 7: Differential mRNA expression at dental stem cells (CLH) and progenies (CLT) in *Med1* cKO (RNA-seq). a GO-based analysis on RNA-Seq expression data comparing *Med1* cKO vs Ctrl at CLH and CLT tissues at 4 wk (average of two litters). Annotations related to upregulated gene sets are shown in pink, and downregulated ones are shown in blue. Arrows show the potential causative pathways to cause cell fate conversion, that were further examined in Fig 7 and Suppl. Fig 6. Heatmaps for hair lineage genes (**b**), negative regulation of ossification (**c**), odontogenesis of dentin containing tooth including mature ameloblast markers (**d**), and increased keratinocyte differentiation markers (**e**).