Direct visualization of emergent metastatic features within an *ex vivo* model of the tumor microenvironment

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ABSTRACT

Preventing tumor cells from acquiring metastatic properties would significantly reduce cancer

mortality[1–5]. However, due to the complex nature of this process, it remains one of the most

poorly understood and untreatable aspects of cancer[6–8]. Ischemia and hypoxia in solid tumors

are requisite in metastasis formation – conditions that arise far from functional blood vessels

and deep within tumor tissues[9,10]. These secluded locations impede the observation of pre-

metastatic tumor cells and their interactions with stromal cells, which are also critical in the

initiation of this process[11,12]. Thus, the initiation of metastasis has been incredibly difficult to

model in the lab and to observe *in vivo*. We present an *ex vivo* model of the tumor

microenvironment, called 3MIC, which overcomes these experimental challenges and enables

the observation of ischemic tumor cells in their native 3D context with high spatial and temporal

resolutions. The 3MIC recreates ischemic conditions in the tumor microenvironment and

facilitates the co-culture of different cell types. Using live microscopy, we showed that ischemia,

but not hypoxia alone, increases the motility and invasive properties of cells derived from

primary tumors. These changes are phenotypic and can occur without clonal selection. We

directly observed how interactions with stromal cells such as macrophages increased tumor

invasion in conjunction with the effects of an ischemic microenvironment. Finally, we tested the

effects of chemotherapy drugs under different metabolic microenvironments and found that

ischemic tumor cells are more resistant to paclitaxel, possibly due to a metabolic resistance

mechanism. Overall, the 3MIC is a cost-effective system that allows for the dissection of the

complexity of the tumor microenvironment and direct observation of the emergence of

metastasis, as well as the testing of treatments that may halt this process.

INTRODUCTION

Most cancer-related fatalities are directly or indirectly caused by metastases[5]. Thus, stopping pre-metastatic tumor cells from acquiring migratory and invasive properties could dramatically reduce cancer mortality[8]. And yet due to the complexity of this process, many of the mechanistic links between cell phenotypes and the disease remain unknown and untargeted. In fact, only a handful of drugs specifically target metastatic steps, and none are known to target or to prevent metastatic initation[6,7].

Multiple steps lead to the formation of successful metastases – each one with their own intricated regulatory mechanisms[1–4]. These diverse mechanisms include cell-autonomous changes such as oncogenic mutations as well as external factors including cell-cell interactions and metabolic conditions in the tumor microenvironment[12–16]. Moreover, many details remain unclear as it is almost impossible to predict when and where metastases emerge *in vivo.* Thus we are often limited to study metastasis via circulating tumor cells, biopsies, and *postmortem* analysis of metastases[17,18].

Cell metabolism is crucial in all steps of the metastatic process. The metabolism of tumor cells is as important as the metabolic composition of the local environments within the primary tumor and in future metastatic sites[16,19]. Among these environmental conditions, hypoxia is the determining factor in the emergence of metastatic cells[13–15] . Recent evidence suggests that most if not all metastatic cells experience low oxygen conditions before leaving the primary tumor[20]. Hypoxia in solid tumors arises in regions with poor blood perfusion and thus it does not occur alone but in combination with low nutrients and the accumulation of metabolic byproducts, a combination referred to as ischemia[21–25]. These metabolic conditions arise as the growth of some tumor cells separates others from nutrient sources. This separation makes these regions key in the initiation of metastasis and simultaneously almost impossible to access and observe *in situ*. Metastasis is also regulated by stromal cells that infiltrate solid tumors. Tumor-associated macrophages are some of the most abundant of these cells and they can promote and facilitate the metastatic process[11,26–29]. The inaccessibility of tumor niches where metastases emerge also impedes the visualization of tumor-stroma interactions and how they are modulated by metabolic factors in the tumor microenvironment.

All these factors make modeling metastasis *in vitro* and *in vivo* extremely difficult. Most tumor

models are better at recapitulating primary tumor growth than later stages of the disease[30,31].

And while some models allow studying spontaneous metastasis after resection of the primary

tumor, most studies deliver tumor cells directly into the bloodstream focusing on the final steps

of metastasis. Thus, due to unpredictable metastatic timing and the inaccessibility of niches

where metastases originate, studying and visualizing the initial steps of metastasis *in vivo* has

not been possible.

The complex set of conditions that drive metastatic initiation, means that there are very few *in*

vitro or *ex vivo* models of this process. These types of models however, could help with the

critical need for affordable and scalable experimental systems that model metastasis under

controlled conditions. Here we present an *ex vivo* model of the tumor microenvironment

specifically designed to visualize the transition from poorly motile primary tumor cells to

migratory metastatic-like cells. Our 3D Microenvironmental Chamber or 3MIC, can incorporate

key pro-metastatic factors such as stromal cell infiltration and tumor ischemia. In this system,

we can directly observe, track, and compare the evolution of well-nurtured and ischemic

multicellular 3D tumor structures using live microscopy and image analysis. While this device

only models a specific aspect of the metastatic process, we believe that its capability for

visualization of usually inaccessible microenvironments and its ease of use can boost our

understanding and treatment of early metastasis.

As a proof-of-principle, we show that ischemic conditions directly drive the emergence of

metastatic features including more efficient cell migration, increased extracellular matrix

degradation, and loss of epithelial features. By combining *in vivo* experiments with 3MIC

cultures, we can show that these are reversible phenotypic changes that do not require clonal

selection by hypoxia or other environmental challenges. We also show tumor interactions with

stromal cells such as macrophages and endothelial cells, increasing the pro-metastatic effects

of ischemia. Finally, we show that ischemic cells are more resistant to the anti-migratory effects

of paclitaxel even when adjusting by concentration and other potential explanations, suggesting

that ischemia provides resistance to this drug. In all, the 3MIC is an affordable and modular

culture system where different components of the tumor microenvironment – and their effect on

the first steps of metastasis – can be carefully dissected.

RESULTS

A 3D *ex vivo* model for the direct visualization of ischemic tumor cells

We wanted to directly visualize the effects of ischemia on the growth and movements of three-dimensional (3D) tumor structures. For most of our experiments, we used small tumor organoids referred to as tumor spheroids. Once formed, we embedded these tumor spheroids in a collagen and laminin-rich extracellular matrix (ECM) scaffold and then observed their development using an inverted spinning disk confocal with the environmental control required for live microscopy.

We recently developed an *ex vivo* culture system where a 2-dimensional (2D) cell monolayer generates spatial gradients of ischemia mimicking metabolic changes present in the tumor microenvironment[32–34]. We thus first tested whether this system, named MEMIC, was appropriate to study the impact of the metabolic microenvironment on 3D tumor structures. To detect if tumor spheroids were experiencing ischemia, we engineered different epithelial tumor cells to express a fluorescent hypoxia reporter (HRE-GFP). These cells also constitutively express membrane mCherry (mCherry-CAAX)[32] to better visualize morphological changes. After culturing these spheroids in the MEMIC, however, we were unable to detect GFP or any changes in spheroid behavior or morphology along the MEMIC (Fig. S1A). It is possible that the absence of gradients in these cultures was due to low cell density[32]. A typical 2D MEMIC culture has about $\sim 10^5$ cells – which is about 100 times higher than the total cell number that we used in our 3D cultures. Attempts to increase total cell number by adding more tumor spheroids, resulted in large cell masses as neighboring clusters merged thus precluding us from examining ischemic cells in detail (Fig. 1A). We thus concluded that the MEMIC was inadequate to study the impacts of the metabolic microenvironment on 3D cultures.

We decided to develop a new culture system specifically designed to visualize the effects of ischemia on multicellular tumor structures. We named this new system the 3D microenvironment chamber or 3MIC. To test this system, we seeded a monolayer of tumor cells derived from a mouse model of lung adenocarcinoma driven by KRAS[G12D] and TP53[-/-35] (referred to here as Lung KP cells). These cells also expressed HRE-GFP and mCherry-CAAX. The principle behind the 3MIC is similar to the one in the MEMIC: a dense monolayer of cells is

restricted from accessing nutrients and oxygen from all but one side. This side acts as the

nutrient and oxygen source as it is open to a large volume of fresh media. This leads to the

formation of well-defined spatial gradients of metabolites (Fig. 1B; Fig. S1C). In the 3MIC

however, these cells are not the focus of our analyses and only act as nutrient and oxygen

consumers. These "consumer cells" grow on a coverslip at the top of the chamber so that they

do not obstruct the microscope's line of sight. We then place embedded tumor spheroids

beneath the consumer cell layers so that they impose a metabolic gradient on the entire culture

(Fig. 1B; Fig. S1C).

We first tested whether cells growing in the 3MIC produced gradients as they would in the

MEMIC. As in our previous experiment, we seeded Lung KP cells engineered to express HRE-

GFP and mCherry-CAAX. As expected, these cells displayed a strong gradient of GFP that

increased with the distance to the 3MIC's opening (Fig. S1B). We then repeated this experiment

but with ECM-embedded tumor spheroids growing below the monolayer of consumer cells. After

only 24h in the 3MIC, ischemic distal tumor spheroids showed high levels of GFP while

fluorescence levels in well-nurtured spheroids were negligible (Fig. 1C,D). As controls, we

embedded similar clusters in a 3MIC but without consumer cells and in this case we did not

detect GFP levels along the entire chamber (Fig. 1C,D). We obtained similar results with three

independently derived clones of Lung KP cells and in experiments using different cell lines and

with a different hypoxia reporter (Fig. S1D). As GFP levels in spheroids closely mirrored levels

in consumer cells we also observed dramatic morphological changes along the ischemia

gradient. Overall, these results show that consumer cells in the 3MIC form ischemic gradients

that determine the local metabolic microenvironment experienced by tumor spheroids. As

changes in the metabolic microenvironment of the 3MIC occur perpendicular to our imaging

path, we can observe how cells change with as much detail as needed. This simple geometrical

feature solved the accessibility to ischemic cells problem allowing us to visualize these cells with

the same ease as well-nurtured tumor structures.

Hypoxia is required but not sufficient to increase invasive features in tumor spheroids

The role of hypoxia in increasing tumor cell migration and invasion is well established[13,14,36–39]. It

is less clear, however, how these changes relate to changes triggered by ischemia – a more

complex challenge that is closer to the experience of tumor cells *in vivo*. Tracking individual

cells from dozens of tumor spheroids at different locations over several days is very data

intensive. To efficiently compare different treatments and conditions, we decided to use a rapid

metric reflecting the changes we observed in ischemic spheroids. We thus defined the

invasiveness index of a spheroid as the inverse of its circularity. Circularity, as a relationship

between area and perimeter, decreases in more irregular shapes. Thus, its inverse increases in

more protrusive and migratory 3D tumor structures (Fig. 1E).

We first tested whether hypoxia was *sufficient* to trigger morphological changes and increase

cell migration in 3D tumor spheroids. We compared spheroids cultured in regular petri dishes

incubated under different oxygen tensions (21% and 1%) with spheroids cultured in the 3MIC.

As in our previous experiments, cells in these spheroids expressed HRE-GFP and mCherry-

CAAX. As expected, tumor spheroids cultured in a hypoxic incubator increased GFP expression

to levels comparable to the brightest clusters in the 3MIC (Fig. S1E). Hypoxic spheroids were

slightly more invasive than spheroids cultured in regular incubators but not nearly as much as

ischemic spheroids in the 3MIC (Fig. 1E). In fact, hypoxic spheroids behaved similarly to well-

nurtured spheroids in the 3MIC suggesting that the latter may experience mild levels of

ischemia. We thus concluded that hypoxia alone only triggers minor morphological changes and

cannot fully recapitulate the changes that we observe in ischemic regions of the 3MIC.

To test whether hypoxia was *required* in altering spheroid morphologies, we took advantage of

the selective permeability of polydimethylsiloxane (PDMS)[32–34]. PDMS is permeable to oxygen

and other gases, but not to soluble metabolites. We thus constructed 3MICs using a PDMS

membrane molded into the shape of a glass coverslip. In these modified 3MICs, cells form

gradients of nutrients and metabolic byproducts, but oxygen rapidly equilibrates across the

PDMS membrane and thus there is no hypoxia (Fig. S1F). In this scenario, the effect of

consumer cells was minimal, with little increase in migration, and spheroids resembling control

cultures in the absence of consumer cells (Fig. 1F,G; Fig. S1F). Altogether, with these

experiments we conclude that hypoxia is *required* but not *sufficient* to increase the

morphological changes we observed in ischemic tumor spheroids. In addition, these results

highlight the advantage to consider complex metabolic challenges instead of single parameters

such as hypoxia.

170 Ischemia stimulates persistent cell migration

Lung KP spheroids growing in the 3MIC showed strong morphological differences along the

ischemic gradient. Distal ischemic spheroids lost their initial smooth and rounded shape

acquiring a ruffled, more protrusive morphology growing significantly in volume (Fig. 2A, Video

S1). We observed equivalent effects in spheroids from a panel of cell lines (Fig. S2A). This

increase in size – of up to 10-times the original volume – correlated with the distance to the

opening and thus to levels of ischemia (Fig. S2B). Control spheroids grown in 3MICs without

consumer cells, showed only a modest increase in growth (~2-fold), remained more smooth and

less protrusive, and none of these changes correlated with their position along the 3MIC (Fig.

2A; Fig. S2A,B). This growth was not driven by cell proliferation, the as detection of mitotic cells

via phospho-H3 immunostaining (Fig. S2C) or live fluorescent reporters (Fig. S2D; Video S2)

revealed a decrease rather than a proliferation increase in ischemic spheroids. Furthermore,

using live imaging we were able to detect a significant decrease in local cell density of ischemic

clusters (Fig. 2B; Video S3)[34] – suggesting that ischemic spheroids expand primarily by cell

dispersion (Fig. 2C).

Taking advantage of the high temporal and spatial resolution in live microscopy afforded by the

3MIC, we measured the migratory properties of individual tumor cells. To allow for accurate

automated cell tracking, we modified Lung KP cells to express a nuclear fluorescent protein

(H2B-YFP) and then we formed chimeric spheroids of these cells with isogenic Lung KP cells

expressing a different fluorophore (mCherry-CAAX; Fig. 2D; Video S4). We tracked hundreds of

cells from different spheroids along the gradient of ischemia. Analysis of nearly 900 tracks of

individual cells showed a large heterogeneity in their motility as some cells wandered near their

origin, while others moved large distances from their origin. On average however, cells from

ischemic clusters travelled further from their original location than cells from well-nurtured

clusters (Fig. 2E, Fig. S2E,F; Video S4). This increase in net displacement in ischemic cells was

not due to an increase in speed (Fig. S2G) but rather because they move more persistently than

well-nurtured cells (Fig, 2F). Consistent with the increase in persistence, Mean Square

Displacement (MSD) analysis of their migratory tracks showed that the movement of cells in

well-nurtured clusters was indistinguishable from a random walk (Fig. 2G, MSD constant,

σ=1.02). In contrast, the movement of ischemic cells was superdiffusive – meaning significantly

more directional than expected by random (Fig. 2G, σ=1.19; Fig. S2J).

To further explore these data, we defined *runners* as cells whose net displacement was greater

than an arbitrary distance threshold (50μm). At most values of this threshold, ischemic clusters

had about twice as many runners than well-nurtured spheroids or spheroids in chambers

without consumer cells (Fig. 2E,H; S2F). Interestingly, we observed a small directional bias in

the movement of runner cells away from ischemia as if they were moving toward nutrient

sources (Fig. 2H; Fig. S2H). However, this directional bias was very small and only significant

under a narrow definition of runner cells (Fig. S2I). We thus concluded that – at least in this

setting – metabolite and oxygen gradients do not act as strong orientation cues. Overall, our

data shows that ischemia leads to more persistent movements in three-dimensional tumor

cultures resulting in highly dispersive and invasive tumor spheroids.

Ischemic tumor cells lose epithelial features and increase ECM degradation

We then sought to determine specific cellular changes triggered by ischemia. Our cell migration

analyses showed that ischemic cells migrate more persistently but not faster than well-nurtured

cells and thus ischemia does not act as a chemokinetic factor. We also did not find strong

evidence of metabolites acting as chemotactic signals. We thus thought that ischemia may

trigger structural changes such as diminishing cell-cell adhesion and their affinity to the ECM.

The increase in MSD shown in Figure 2G, provides insight into the impact of ischemia on cell

movements. From a statistical point of view, it shows that on average these cells keep moving in

the same direction for longer periods of time – even if this direction is random[40]. In other words,

these data suggest that the movements of ischemic cells are less constrained for longer than

well-nurtured tumor cells. Typically, these constraints can come from the ECM scaffolding and

from cell-cell adhesions[41,42]. We thus tested whether ischemic spheroids increase ECM

degradation, reduce cell-cell adhesion, or both. As a first approach to measure ECM

degradation, we used a well-established quantitative ECM degradation assay[43]. Briefly, a layer

of proteins – in this case collagen – is laid over a coverslip coated with fluorescent gelatin. More

invasive clusters will break down the collagen network, and eventually, the labelled gelatin

resulting in local loss of fluorescence (Fig. 3A). With this assay, we determined that ischemic

spheroids increased ECM degradation and so do ischemic consumer cells (Fig. 3B; Fig. S3A).

As an orthogonal approach, we cultured tumor spheroids in DQ-Collagen – a labeled but

quenched form of collagen that fluoresces when cleaved[44]. Again, in this assay ischemic

clusters showed a much higher ECM degradation (Fig. S3B) and the fluorescence of DQ-

Collagen colocalized with cell structures that protruded into the ECM (Fig. S3C).

As we showed above, cells from ischemic clusters rapidly disperse a process that requires

reducing cell-cell adhesion. The cell adhesion molecule E-Cadherin (E-Cad) has a key role in

the integrity of epithelial tissue[45,46]. As epithelial-derived carcinoma cells, our Lung KP cells,

display well-defined cell-cell adhesions lined by high levels of E-Cad (Fig. 3C). There is

evidence that metabolic conditions in the tumor microenvironment decrease epithelial features

in carcinomas[37,39,47–51], including our data showing that mammary tumor cells in the MEMIC

dramatically reduce CDH1 levels[32]. We thus asked whether ischemic spheroids also decrease

CDH1-mediated cell-cell adhesion. Using CDH1 immunofluorescent staining we observed that

tumor spheroids in the 3MIC decreased CDH1 levels in correlation with ischemia (Fig. 3C,D).

We observed a similar trend using a fluorescent CDH1 live reporter (Fig. S3D). While spheroids

decreased these epithelial features, we did not see signs of the acquisition of a mesenchymal

fate such as increased vimentin levels, and we thus concluded this is not EMT. Taken together,

these results show that ischemic cells decrease epithelial adhesion and degrade their

surrounding ECM more efficiently.

A model of persistent tumor migration in the absence of directional cues

While the evidence that hypoxic, *i.e.* ischemic, tumor cells metastasize more *in vivo* is well-

established[11,13,15,20], it is at the same time puzzling. If ischemic cells are located – by definition –

far from blood vessels then, how do these distal cells move through the tumor, invade the ECM,

and reach the bloodstream? An appealing hypothesis is that nutrients or oxygen act as

directional cues that orient the movements of ischemic cells. However, our data do not support

this hypothesis (Fig. 2H; Fig. S2H). We thus asked whether our other observations – more

persistent movement, decreased epithelial adhesion and more efficient invasion of the ECM –

would allow ischemic cells to move through surrounding well-nurtured cells and invade the

ECM.

We decided to address this question conceptually using a Cellular Potts Model (CPM)[52,53].

CPMs are a computational framework frequently used to solve problems of differential cell

adhesion and sorting in morphological processes[54]. In CPMs, any number of 'cell types' exist on

a grid and have different affinities for each other and for their surrounding substrate. In CPMs,

high affinity contacts have a lower surface energy and thus they are more stable. In contrast,

low cell-cell or cell-substrate affinities are represented as highly energetic and unstable contacts

(Fig. 3E). At every simulated time point or Monte Carlo Step (MCS), the CPM tries to minimize

the energy of the system resulting in changes in cell shape, localization, etc. according to local

energy levels[52,53]. In our model, we defined small tumors formed by two cell types: *core*

(ischemic) and *cortical* (well-perfused) cells according to their positions at the beginning of the

simulation. Our specific goal was to test whether changes in cell-cell and cell-substrate

adhesion would allow core cells to move through cortical cells and eventually invade into the

surrounding ECM (Fig. 3E).

We modelled the reduced levels of E-Cad we observed in ischemic cells as an increase in the

surface energy between core cells (decreasing their stability). Energy levels were set to ensure

that the adhesion between core cells was low, between cortical cells was high, and intermediate

between the two cell types. We tested a range of affinity parameters obtaining similar qualitative

results as long as we kept these relationships. Implementation of these changes in adhesion

resulted in clusters where core cells mixed with cortical cells but there was no invasion into their

surroundings (Fig. 3F; Video S5). To model the increased ECM invasion in ischemic cells, we

gave core cells a higher affinity for the surrounding ECM than cortical cells. This feature alone,

produced poor mixing between populations and some invasion into the surrounding ECM (Fig.

3F; Video S5). However, the overall movement of these cells was random and did not show the

persistence we observed in our experiments (Fig. 3F; S3E).

We then combined these two rules – core cells with decreased cell-cell adhesion and increased

cell-ECM adhesion. In this case, ischemic core cells moved through layers of well-perfused cells

and rapidly dispersed through the surrounding ECM (Fig. 3F; Video S5). These virtual cell

movements were remarkably close to the movements of our experimental cells. For example,

tracks of core and cortical cells in the model (Fig. 3G), resembled the movements of ischemic

and well-nurtured cells, respectively (compare with Fig. S2F). Most strikingly, core cells with

these two rules increased their MSD and they did so in the same order of magnitude as

experimental cells in the 3MIC (compare Fig. 3H and Fig. 2G). Altogether these data suggest

that increasing the affinity for the ECM and decreasing cell-cell adhesion is sufficient for the

spontaneous emergence of directional movements and the dispersion of core cells into distal

ECM surroundings – even in the absence of explicit directional cues.

Pro-metastatic features induced by ischemia are reversible

Hypoxia and ischemia are known to trigger transcriptional and other phenotypic changes that

increase cell migration and invasion[13–15,55,56]. But recent evidence suggests that hypoxic

environments may select for more aggressive clones.[20] The brief timescale of our 3MIC

experiments (~24-72h) neglects any significant role for selection and underscores the

importance of phenotypic adaptations to ischemia. *In vivo* however, time scales are much

longer, which may allow ischemia to select for more migratory clones. We hypothesized that, if

ischemic cells are selected to be more migratory *in vivo*, they should display a higher migratory

phenotype in the 3MICs – irrespective of their location. To test this hypothesis, we injected Lung

KP expressing GFP-HRE cells into the flank of syngeneic mice. After 2 weeks, tumors were

extracted and dissociated into single cells. Using flow cytometry, we sorted ischemic from non-

ischemic cells according to their GFP levels (Fig. S4A). From these sorted cells, we generated

tumor spheroids, which we then cultured into separated 3MICs (Fig. 4A; Fig. S4B). As shown in

figure 4C, the increase in cell migration and invasion strongly correlated with their distance to

the opening but did not depend on whether spheroids came from low or high GFP tumor regions

(Fig. 4B,C). Importantly, these spheroids did not show any increase in migratory properties

when cultured in 3MICs without consumers – regardless of where in the tumor they came from

(Fig. S4C,D). Altogether, these results show that the pro-metastatic features produced by

ischemia are reversible phenotypic changes and suggest that, at least in this system, they do

not require clonal selection.

Reconstruction and visualization of more complex microenvironments

Solid tumors are infiltrated with a variety of stromal and immune cells[11]. Among these different

cell types, tumor-associated macrophages (TAMs) are one of the most abundant and can

increase, tumor progression, metastasis, and mortality[26–29,57–59]. TAMs can recruit endothelial

cells and help to orchestrate the vascularization process required for tumor growth and

metastasis. We recently showed that a combination of hypoxia and high lactic acid typically

found in ischemic tumor regions, activate the ERK/MAPK in macrophages who then secrete

VEGFA and induce tube-like morphogenesis in endothelial cells[33]. Since this process only

occurs under ischemia, it provides a great system to test the co-culturing capabilities of the

3MIC.

We first generated endothelial spheroids from SVEC4-10 cells (referred as SVECs). We then

co-cultured these spheroids in 3MICs filled with ECM containing a suspension of bone marrow-

derived macrophages (BMDMs), or ECM without BMDMs. In the absence of macrophages,

clusters of endothelial cells remained mostly rounded – even in the presence of consumer cells

and regardless of their location along the ischemic gradient (Fig. 5A; Video S6). In the presence

of macrophages however, endothelial cells extended away from the clusters and sprouted into

the ECM (Fig. 5A; Video S6). Importantly, endothelial clusters in co-cultures without consumer

cells did not show major morphological changes, indicating that in the absence of strong

ischemia, macrophages do not have a strong pro-angiogenic role (Fig. S5A). Consistently, tube-

like morphogenesis only occurred within ischemic regions of the 3MIC (Fig. 5A; Video S6).

Consistent with previous evidence[29,33], inhibition of VEGF signaling completely abrogated

macrophage-induced endothelial sprouting (Fig. 5B; Fig. S5B). Altogether, these results confirm

that ischemic macrophages induce tube-like morphogenesis in endothelial cells in a VEGF-

dependent manner.

After verifying that the 3MIC is well-suited for co-culture experiments, we conducted similar

experiments, but this time using Lung KP tumor spheroids and BMDMs. In these experiments,

ischemia alone or the presence of macrophages – even in well-nurtured regions – increased cell

migration and ECM invasion (Fig. 5C). However, we also observed a strong synergy between

ischemia and the presence of macrophages increasing cell migration and invasion (Fig. 5C) and

decreasing E-Cad levels (Fig. 5D; Fig. S3D). A fascinating observation was that tumor cells

from ischemic spheroids extend protrusions towards macrophages appearing to physically drag

them into the tumor cell cluster (Video S7).

Finally, to demonstrate that it is easy to increase the cellular complexity in the 3MIC, we co-

cultured all three cell types. In this case, we formed mixed SVEC/Lung KP spheroids embedded

in ECM containing BMDMs (Fig. 5E; Video S8). Again, here it is possible to observe the strong

synergy of the combination of macrophage and metabolic signals.

Ischemic cells are more resilient to anti-migratory drugs

Witnessing the transition from poorly migratory tumor cells to highly invasive ones, provides a

unique opportunity to test drugs that directly target metastatic initiation. As a proof of principle,

we tested the effects of paclitaxel on migratory tumor spheroids. Paclitaxel stabilizes

microtubules leading to mitotic arrest and cell death[60]. At lower concentrations however,

paclitaxel inhibits cell migration without a significant effect in cell viability[61,62]. We established

that concentrations ranging from 30-200nM produced a complete inhibition of cell movements in

well-nurtured tumor spheroids, while having a negligible effect on cell viability (Fig. S6A,B).

Surprisingly, paclitaxel completely failed at inhibiting the migration of ischemic cells (Fig. 6A,B).

The lack of response in ischemic spheroids may result from three possible mechanisms. First,

drug levels may decrease due to passive diffusion along the 3MIC. We quickly ruled out this

explanation because control spheroids in 3MICs without consumers are not resistant to the

effects of paclitaxel (Fig. 6A,B). A second mechanism is that consumer cells accentuate any

potential drug dilution due to diffusion by consuming or actively degrading paclitaxel. To test this

alternative, we need to visualize or measure local levels of paclitaxel and compare how they

change along 3MICs with or without consumer cells. Fortunately, fluorophore-conjugated

paclitaxel analogues are routinely used as probes to label microtubules. Thus, we can directly

visualize the microtubules of cells exposed to known quantities of these analogues and

determine how they change along 3MICs. We first treated tumor spheroids in the 3MIC with

30nM of a labelled paclitaxel analogue (docetaxel-Cy5). As shown in Fig. 6C, fluorescence

levels progressively decreased in more distal spheroids, but they did so at the same rate in

3MICs with or without consumer cells (~7% *per* mm, Fig. 6C,D; Fig. S6C). We then repeated

these experiments while increasing the levels of paclitaxel to 150nM. These levels even after

accounting for the effects of diffusion should ensure that the most distal spheroids experience

levels of paclitaxel that inhibit migration in well-nurtured spheroids (estimations: 45nM at 10mm

and 24nM at 12mm). Even under these conditions, ischemic clusters increased pro-metastatic

features such as increased cell migration and invasion (Fig. S6D). Together these data show

that ischemia reduces the effects of paclitaxel. We thus conclude that the reason why ischemic

spheroids do not respond to paclitaxel treatment is not due to drug penetration or diffusion

suggesting a true paclitaxel resistance mechanism induced by the metabolic microenvironment

invasion (Fig. 6E). Altogether these experiments show that the 3MIC recapitulates key features

of the tumor microenvironment, allows for the imaging ischemic cells that are hidden to

conventional techniques, and permits one to test the effects of drugs in the presence of stromal

cells in order to untangle different factors affecting the emergence of metastatic features.

DISCUSSION

Animal models are a fundamental tool to study the complex and heterogeneous tumor microenvironment[31,63]. However, the complexity of animal physiology challenges the assessment of the contribution of different variables, and their use for large experiments is severely impossible due to economical and ethical concerns[64,65]. On the other side of the spectrum, conventional *in vitro* experiments offer much better experimental control and can be easily used in high throughput approaches. However, these cultures do not model the metabolic heterogeneity and other essential features of the tumor microenvironment. These challenges have been particularly evident when studying the emergence of cancer metastasis[6–8].

In this article we described the design and implementation of the 3MIC – an *ex vivo* culture system that allows us to track pre-metastatic cells and their transition to metastatic-like migratory cells in complex 3D tumor cultures. This system overcomes the visualization limitations by decoupling the cells of interest from the cells that create nutrient-deprived conditions.

As expected, we can show that hypoxia in the 3MIC is important for the emergence of metastasis. However, the more complex environments created in the 3MIC show that additional metabolic conditions in the tumor microenvironment point to and are also required for metastasis. Consistent with our data, a recent paper showed that nutrient deprivation triggers the release of pro-migratory cytokines[66]. Similarly, there is accumulating evidence that cell metabolism and metabolic signals including nutrients such as pyruvate[16], are critical in determining the likelihood, number, and destination of metastasis[16,19]. These data, showing how tumor behavior is modulated by a complex mix of metabolic signals, indicates that there is an urgent need for a better characterization of ischemia.

Our data shows that ischemia leads to more directional cell movements. Mechanistically, we show that ischemia leads to a decrease in epithelial adhesion and increased degradation of the extracellular matrix. While our combination of experiments and simulations do not prove that lower cell-cell adhesion and increased invasion in ischemic cells are the only way ischemic cells can escape a cell mass, they show that these mechanisms may be sufficient to do so.

While some of our observations share features with the process of epithelial-to-mesenchymal

transition (EMT), we avoided using this term for several reasons. First, we only observed a

decrease in epithelial features without an increase in mesenchymal markers such as vimentin.

Second, the role of E-Cadherin in EMT is a lot clearer during development than in cancer[67,68],

where its role remains controversial[49,69].

At the single cell level, ischemia increases cell persistence without the need of an intrinsic

mechanism for cell polarity and directional cell migration. However, we observed a small bias

towards higher nutrients in the direction of cell movements. While in our settings these

differences were close to statistical significance thresholds, it would be consistent with

widespread examples of starvation and nutrient-driven chemotaxis in prokaryote and eukaryote

cells[70,71]. Interestingly, the key nutrient sensor mTORC2 is critical in neutrophil chemotaxis. Still,

additional experiments will be needed to establish chemotaxis as a potential strategy for nutrient

scavenging in tumors.

Recent evidence shows that tumor hypoxia can act as an evolutionary pressure that selects for

tumor clones that are more resilient to stressors such as reactive oxygen species[20,49,72].

However, our data shows that hypoxia and ischemia can alter cells directly without the need of

clonal selection. These two ideas are not in conflict and our experimental conditions are not free

of caveats. Most likely the acquisition of metastatic features in patients occurs by a combination

of selection and opportunistic adaptations to the tumor microenvironment.

The direct visualization of tumor-stroma interactions afforded by the 3MIC has unique

advantages. For example, we were very surprised to observe how much of the movement of

macrophages towards tumor structures, seemed to be driven by tumor cells, dragging

macrophages into their clusters (see for example Video S7). It is possible then, that part of the

immune infiltration of tumors is driven by physical recruitment by tumor cells. While we are not

aware of reports about this behavior *in vivo*, this may be due to the lack of other techniques for

the direct visualization of the tumor microenvironment highlighting the contributions the 3MIC

may bring to the community.

Poor vascularization in tumors hampers drug delivery to ischemic cells where concentration is

lowered by diffusion through tissues[73]. Thus, *in vivo* it is difficult to discern whether a decrease

in drug response is due to lower drug concentration or due to intrinsic changes in cells that

make them more drug resistant. The 3MIC however allows for the separation of these effects.

While the resistance to paclitaxel we show here is interesting, we chose this drug primarily

because its use as a microtubule probe allowed us to estimate local concentrations. However,

we plan to use the 3MIC to screen for genetic and pharmacological perturbations that may

prevent the increase of migratory behaviors triggered by ischemia.

The microfabrication of the 3MIC is easy and affordable only requiring a conventional 3D printer.

Also, this system seamlessly integrates existing co-culture and *ex vivo* protocols already used in

other laboratories. Thus, we invite the research community to use the 3MIC to study and rapidly

assess the effects of different factors on metastasis before moving to expensive *in vivo* models.

METHODS

Cell culture

Lung KP clones and Lung KPK clones were derived in the $KRAS^{G12D}/TP53^{-/-}$ and and $KRAS^{G12D}/TP53^{-/-}$ / Keap 1$^{-/-}$lung adenocarcinoma model, respectively, developed and kindly shared by Dr. Thales Papagiannakopoulos. MCF10A, MCF7, DlD1 cells and SVEC-4-10 cells were purchased from ATCC. C6-HRE-GFP cells were a kind gift from Dr Inna Serganova (Memorial Sloan Kettering Cancer Center, New York, NY, USA). Cells were cultured in High Glucose DMEM (Gibco, #11965-092) supplemented with 10% Fetal Bovine Serum (FBS; Sigma-Aldrich, #F0926) at 5% CO_2 and 37°C. Lung KP cells stably expressing a hypoxia reporter (pLenti-5XHRE-GFP, Addgene #128958, denoted here as HRE-GFP), cell membrane marker (pLenti-mCherry-CAAX, Addgene #129285), E-cadherin reporter (pHAGE-E-cadherin-RFP, Addgene #79603), cell cycle reporter (pBOB-EF1-FastFUCCI-Puro, Addgene #86849), LV-YFP (Addgene #26000), and pLenti-H2B-iRFP720 (Addgene #128961) were generated using standard lentivirus mediated stable cell lone preparation protocols. H2B-mCherry was cloned by removing YFP from the LV-YFP vector using BamHI and KpnI restriction enzymes. The linearized vector containing H2B was then ligated with mCherry using SLIC[74].

Formation of 3D tumor spheroids

Spheroids of cells were formed via hanging drops following standard protocols [75]. Briefly, cells were dissociated into a single-cell suspension of 10^4 cells/ml. The cell suspension was distributed into 20μl droplets onto the lid of a Petri dish. The base of the dish was filled with PBS (Gibco, #14040-133) or distilled water to prevent droplet evaporation during the incubation time. The lid was then inverted onto the dish and incubated for 96 hours, to ensure the formation of compact spheroids. Typically, we cultured ~50 spheroids in each 3MIC chamber.

Isolation and differentiation of BMDMs

Bone marrow-derived macrophages (BMDMs) were extracted from C57BL/6 mice following standard protocols[33,34]. Following isolation of the bone marrow, cells were cultured in low attachment culture dishes (VWR, #25384-342) in High Glucose DMEM supplemented with 10% FBS and 10ng/mL Recombinant Mouse CSF-1 (R&D Systems, #416-ML) for 7 days.

Establishment of tumor-derived clones

Approximately 5x10^4 cells Lung KP cells, stably expressing pLenti-5XHRE-GFP and pLenti-mCherry-CAAX were injected subcutaneously into C57BL/6 mice and grown for 14 days. Tumors were then extracted and dissociated using a solution containing of 2U/ml Dispase and 4mg/ml Collagenase IV. Cells were then sorted using FACS according GFP levels. GFP-positive and negative cells were grown separately as clusters using the hanging drop method described above.

3D printing and microfabrication

To create the framework of 3MIC fused filament fabrication was used. Designing of the framework was done using openSCAD (https://openscad.org). 3MICs were printed in two parts that were later assembled: the main framework and the upper coverslip holder (where consumer cells are grown). These parts were printed in an Ultimaker 3B printer using Black PLA filament. Alternatively, the framework can be printed using Stereolithography (SLA) printers. In this case, the entire framework (the upper coverslip holder and main framework) can be printed as one unit. We used Formlabs's Dental SG resin to print the framework on Form 3 (Formlabs). The uncured resin was removed from the prints by washing them in isopropanol for 1 h and further post-curing it with UV irradiation heated at 60°C. A glass coverslip (VWR, No. 1, 22x60mm, #48393-070) was glued to the base of the main framework using a UV-curable adhesive (Norland Products, NOA68) using a long-wave UV lamp (MelodySusie, DR-5401). Then, the coverslip holder fragment was glued onto the glass coverslip. Finally, the assembled 3MIC was sterilized in a short-wave UV lamp chamber (Meishida, CM-2009) for 15 minutes.

Culture of tumor spheroids in the 3MIC

To prepare the layer of consumer cells, 24hrs before the day of the experiment, a coverslip (VWR, No. 2, 18x18 mm, #48366-045) was coated with Poly-D-lysine (Sigma-Aldrich, #P6407) to aid adherence of cells to the glass surface. Cells were detached using trypsin and diluted into a cell suspension of a density of 3.5x10^5 cells/mL for faster dividing cells and 10^6 cells/mL for slower dividing cells. The coverslip was placed into a well of a 6-well dish and covered with 1mL of the cell suspension. The coverslip was incubated overnight at 37°C to let the cells adhere to

the coverslip. On the day of the experiment, the spheroids were collected from the Petri dishes

by inverting the lid and gently flushing all the spheroids with DMEM supplemented with 10%

FBS using a 5mL serological pipette. The spheroid containing suspension was collected and

centrifuged at 50G for 10-15 minutes. Meanwhile, a thin bed of 110μL ECM was made in the

3MIC – here, we used either 2.2mg/mL rat tail Collagen (Corning, #354236) – or 2:3 mix of

Matrigel and 1.6mg/ml of rat tail Collagen I and incubated at 37°C for 20 mins to allow the

polymerization of the ECM. Spheroids were resuspended in about 110μL of ECM and

immediately transferred onto the polymerized ECM bed. The ECM with spheroids was

polymerized at 37°C for ~30 minutes. With the help of forceps, the coverslip containing the

consumer cells was inverted and inserted into the slot of the coverslip holder. The 3MIC was

then gently filled with 1.25mL of media, avoiding trapping bubbles underneath the consumer

coverslip. Control wells are assembled in the same way, but the top coverslip has no consumer

cells.

Collagen degradation assay

To investigate the invasive potential of cells across the gradient, the ECM was mixed with DQ-

collagen, type I From Bovine Skin, Fluorescein Conjugate (Invitrogen, #D12060) at a final

concentration of 25μg/ml. This ECM was used to prepare the bed and embed the spheroids as

well. The extent of degradation of the matrix was determined by measuring the fluorescence

intensity of cleaved collagen.

Gelatin degradation assay

Glass coverslips were coated with gelatin from pig skin, Oregon Green 488 Conjugate (Thermo

Fisher Scientific, #G13186), by inverting coverslips on 20µl drops of fluorescent gelatin

(1mg/ml) and incubating for 20 minutes. The coverslips were then lifted, excess liquid drained,

and inverted on 40µl drops of 0.5% glutaraldehyde for fixation. The coverslips were then

washed with PBS and glued onto the PLA frame using the UV-curable adhesive (Norland

Products, #NOA68) and cured in a long-wave UV lamp (MelodySusie, #DR-5401) for 15

minutes. The cured coverslip was then UV-sterilized and used for the experiment. Briefly, the

spheroids were collected from the hanging drops and centrifuged and resuspended in 100µl of

media. The spheroid solution was carefully placed on the coated coverslips and incubated for

30-60 minutes to allow the spheroids to settle down. After ensuring that there are no floating

spheroids, the consumer coverslip was transferred into the 3MIC and the remaining 1.4ml of

media was added. The 3MICs were incubated at 37°C, for 24 hours. After 24 hours, the 3MICs

were fixed using 4% paraformaldehyde (PFA) for 10 mins and imaged using 10X objective of

Nikon Eclipse Ti2-E spinning disk confocal microscope.

Microscopy

Microscopic images were captured using a 10x objective of Nikon Eclipse Ti2-E spinning disk

confocal microscope, at fixed timepoints or set up for time-lapse microscopy. For time-lapse

microscopy, cells were maintained at 37°C using a stage top incubator (Tokai Hit, #INUCG2-

KRi) and the chamber was connected to a humidified mixed gas source (5% CO_2). Spheroids

from different regions of the 3MIC were imaged at suitable time-intervals in different fluorescent

channels. Typically, we imaged ~10 spheroids per 3MIC every 15-30 mins for 24h.

Immunofluorescence

Spheroids within the 3MIC were fixed using 4% PFA (Affymetrix, #19943) for 10 minutes at

room temperature and washed four times with PBS. Cultures were permeabilized using PBS

containing 0.5% (vol/vol) Triton-X-100 (Sigma-Aldrich, #T8787) for 20 minutes and washed

three times with PBS. Slides were blocked in 10% FBS in immunofluorescence (IF) buffer (0.3M

glycine in PBS) for 60 minutes at room temperature. Primary antibodies were diluted at 1:200 in

the same blocking solution. We used anti-phospho-H3 (Cell Signaling Technologies, #9706), E-

cadherin (BD Bio Sciences, #610182), and CD45 (R&D, #AF114) antibodies. 3MICs were

incubated with primary antibodies overnight at 4°C, then washed with IF buffer and incubated

overnight at 4°C with secondary antibodies also diluted in blocking solution at 1:200. Cultures

were then washed and counterstained with 0.5µg/mL Hoechst 33342 in PBS (Invitrogen,

#H1399).

Image analysis

Automated cell tracking was conducted as previously described[34]. Persistence is defined as the

ratio between the net displacement of a cell over its trajectory. We estimated the local cell

density using a method based on the Delaunay triangulation of neighboring cells[33,34]. Per cell,

per spheroid, and population levels of florescence were estimated using custom image analysis
software as previously described[32].

Cellular Potts Model (CPM) simulations

Simulations were conducted using a MATLAB CPM implementation[76]. Adhesion between core
(C1) and cortical (C2) cells were implemented as:

$$J_{C1,C1} > J_{C1,C2} > J_{C2,C2}$$

Where $J_{i,j}$ is the surface energy at every contact point between the two cells[53]. This relationship
modeled the decrease in E-Cad levels in ischemic cells. The differential affinity for the ECM in
core cells was simulates as:

$$J_{C1,ECM} < J_{C2,ECM}$$

The CPM was implemented in a 200x200 grid with 100 initial cells and run for $1,28 \times 10^8$ Monte
Carlo Simulation steps. MATLAB routines to run the simulations are available upon request.

Statistics

We conducted at least three biological replicates of all experiments. Unless noted, we used two-
tailed t-student tests to estimate p-values between two conditions and Pearson's linear
coefficient when testing correlations. For multiple comparisons, we used one-way ANOVA
followed by a Tukey-Kramer test. In all plots, error bars show standard deviation from the mean.
In boxplots, center lines show the median and box edges show 75th and 25th empirical quartiles
of the data.

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Experiments by LA, JG, JL, MR, and C-CF. Image analysis: CC-F, LA, and LJ. Mathematical

modeling: CC-F. Manuscript written by CC-F with feedback and contributions from all authors.

Competing interests: The 3MIC is an embodiment of a patent application to which CC-F is an

inventor.

Data and materials availability: All data is available in the manuscript or the supplementary

materials. Original raw files and analysis software are available upon request. Use of the 3MIC

requires a Material Transfer Agreement and it is free for non-commercial and academic

purposes.

ADDITIONAL INFORMATION

Supplementary information is available for this paper. Correspondence and requests for

materials should be addressed to CC-F.

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FIGURE LEGENDS

Figure 1: Design and implementation of a metabolic microenvironment chamber for 3D cultures.
A. Schematic showing that in solid tumor and conventional tumor organoids. Metastases often emerge from ischemic regions that are hard to access and image in these systems.
B. Schematic cross-section of the 3MIC. In this system, a monolayer of "consumer" cells grows on the top coverslip. Tumor spheroids grow underneath these cells embedded in ECM and are enclosed in a small space connected only one side through (left) to a large reservoir of fresh media.
C. *Per* spheroid GFP levels of HRE-GFP lung KP cells cultured in the 3MIC. GFP levels are a proxy for hypoxia and are. Normalized to constitutive mCherry-CAAX signal. Dashed line: linear fit.
D. Whole-3MIC images showing GFP and mCherry fluorescence in tumor spheroids cultured alone (left column) or in the presence of consumer cells (right column). Bottom panels highlight representative tumor spheroids. Bars: 1000μm, 100μm for insets.
E. We defined invasiveness index, as the perimeter of tumor spheroid over the perimeter of a circle with the same area. Using this index, we quantified the invasiveness of lung KP cluster under different environments. Well-nurtured, intermediate, and ischemic condition correspond to different regions of the 3MIC. Data points: per spheroid invasiveness.
F. Representative images of individual Lung KP spheroids grown Lung KP spheroids for 24h in the absence of consumer cells (top), or in consumer cells in PDMS- or glass-based 3MICs (center and bottom). Numbers in lower right corner denote the distance to the opening in mm. Bars:100μm
G. Quantification of experiment shown in (**F**). Data points: invasiveness index of individual spheroids. Dash lines: linear fit.

Figure 2: Ischemic cells in the 3MIC migrate more.

A. Left: Schematic showing the experimental design. Center: Lung KP spheroids imaged after 0h (top) and 24h (bottom) of growth in different regions of the 3MIC but without consumer cells. These clusters grew uniformly and retained smooth round shapes. Right: Same data but for spheroids grown in the presence of consumer cells. Ischemic spheroids grew larger and more protrusive. Numbers in lower right corner denote the distance to the opening in mm. Bars: 100μm.

B. Image-based method to estimate local cell density. We first located individual cells expressing a fluorescent nuclear marker (H2B-YFP). Then we triangulated closest neighbors and estimated areas between these neighbors. Cell density is the inverse of the area.

C. Cells in ischemic spheroids disperse more with a larger decrease in local cell density.

D. Schematic depicting the experimental setup for chimeric spheroids formed by cells expressing different fluorophores. We then tracked individual cells and calculated their speed, direction, and persistence (final distance/trajectory). Representative images show randomly selected cell tracks.

E. Tracks of individual cells centered at their respective origins. Tracks in top 5 plots came from 5 different tumor spheroids located at various distances along the 3MIC but in the absence of consumer cells. Lower 5 plots show tracks of 5 clusters at similar distances as the plots above but in the presence of consumer cells. Arrowheads show tracks of runner (defined as having a net displacement of 50μm or more).

F. Persistence of individual cells. Cells in ischemic spheroids are significantly more persistent than cells in well-nurtured spheroids.

G. Mean-squared displacement (MSD) analysis of all tracked cells. Ischemic cells show superdiffusivity (α>1), *i.e.* they disperse more than the random expectation. This is consistent with their higher persistence.

H. Compass plots showing the direction and magnitude of final displacement. Runner cells highlighted in purple. Ischemic cells show a small bias towards high nutrients levels (left).

Figure 3: Computer simulations suggest that a decrease in epithelial adhesion and increased invasion synergize to disperse tumor cells.

A. Schematic depicting gelatin degradation assay.

B. Representative images of spheroids grown on gelatin coated surface under no gradient and 3MIC conditions. Ischemic spheroids show much higher gelatin degradation (dark regions, red arrowheads). Bars: 100μm.

C. Representative images of lung KP spheroids grown in the 3MIC and immunostained for E-cadherin (green). Nuclei stained with Hoechst (blue). Bars: 100μm.

D. E-cadherin levels decrease with ischemia gradient. Data points: per spheroid E-Cad levels. Dashed line: linear fit. Bars: 100 μm.

E. We simulated the behaviors of ischemic (core, green) cells and well-nurtured (cortical, magenta) cells using a Cellular Potts Model. See more details in main text and supplementary information.

F. Initial and final conditions of simulated tumor populations simulations under different rules. We found that the combination of lower epithelial adhesion and invasion, but not each process alone, capture the main features of our experimental data.

G. Tracks of simulated ischemic (core) and well-nurtured (cortical) cells. In the lower epithelial adhesion and invasion show a remarkably similar pattern to tracks obtained from microscopy time-lapse tracking of individual cell movement.

H. MSD of simulated well-nurtured and ischemic cells with lower epithelial adhesion and invasion. MSD data is in the same order of magnitude as experimental data (Fig. 2G).

Figure 4: Ischemia induced invasiveness is a phenotypic change.
A. Lung KP cells expressing HRE-GFP and mCherry-CAAX were injected subcutaneously in C57BL/6 mice and allowed to grow for 14 days. These syngeneic tumors were extracted and FACS-sorted into GFP positive (hypoxic/ischemic) and GFP negative (normoxic/well-nurtured) populations. These different sub-populations were then grown as tumor spheroids in 3MICs in the absence or presence of consumer cells.
B. Quantification of invasiveness of experimental setup shown in (**A**). Squares show the invasiveness indexes of individual spheroids. Dashed lines: linear fit. We observed that ischemia in the 3MIC increased invasion in spheroids derived from both, well-nurtured and ischemic tumor regions.
C. Representative images of tumor spheroids growing at different locations of 3MICs. Numbers in lower right corner denote the distance to the opening in mm. Bars: 100μm.

Figure 5: Coculture of different cells in 3MIC.

A. Clusters of endothelial cells (SVECs, red) grown in 3MICs in the presence or absence of BMDMs (cyan). Ischemic macrophages induced sprouting in SVEC clusters suggesting induction of angiogenesis. Bars: 100 μm.

B. Quantification of induction of SVEC sprouting by BMDMs with or without VEGFA inhibition (Linifanib).

C. Representative images and quantification of invasiveness of Lung KP spheroids co-cultured with BMDMs in the 3MIC. Ischemic macrophages significantly enhance tumor invasiveness. Data points: *Per* spheroid invasiveness. Bars: 100μm.

D. Representative images of lung KP spheroids grown in the 3MIC and immunostained for E-cadherin (green) and in the presence or absence of macrophages (magenta). Note that ischemia and macrophages synergize in their reduction of E-Cad levels. Bars: 100 μm.

E. Representative images of triple co-cultures: Chimeric Lung KP cells and SVEC spheroids, were grown in the presence of BMDMs under no gradient conditions and 3MIC. Numbers in lower right corner denote the distance to the opening in mm. Bars: 100μm.

Figure 6: Ischemia induces chemoresistance in ischemic spheroids.
A. Representative images of Lung KP spheroids grown in the presence and absence of 30nM Paclitaxel, showing ischemic spheroids retained migratory capacity. Bars: 100μm.
B. Quantification of (**A**). Points: invasiveness of individual clusters.
C. Representative images of Lung KP clusters grown in the 3MIC in the presence or absence of gradients and treated with a fluorescent paclitaxel analog (Docetaxel-Cy5). We used levels of this dye to estimate local levels of the drug in the 3MIC. Numbers in lower right corner denote the distance to the opening in mm. Bars: 100μm.
D. Estimated levels of paclitaxel in the presence or absence of consumer cells. While diffusion did play a role in decreasing drug levels in both conditions, consumer cells did not. Thus, differential response to paclitaxel cannot be due to lower drug availability but triggered by some ischemia-related process.
E. Summary: ischemia enhanced ECM degradation increasing tumor invasion. This environment also leads to paclitaxel resistance.