Development of a major histocompatibility complex class II conditional knockout mouse to study cell-specific and time-dependent adaptive immune responses in peripheral nerves.

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We confirm that we have read the Journal's position on issues involved in ethical publication and affirm that this report is consistent with those guidelines

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Conflict of Interest Disclosure

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Research Center (MMRRC) for worldwide distribution to academic, non-profit and for-profit organizations and companies based on Materials Transfer Agreements and commercial licensing contracts with the University of Alabama at Birmingham Harbert Institute for Innovation and Entrepreneurship (HIEE). The remaining authors have nothing to disclose

Ethics Approval Statements

The use of archived de-identified patient sural nerve biopsies from the UAB Hospital Shin J. Oh Muscle and Nerve Histopathology Laboratory for biomedical research was approved by the Institutional Review Board (Protocol #140321012) and subsequently determined exempt from annual review, based on the 2018 Revised Common Rule regulations (Category 4), as of 11/22/2019.

All experimental mouse studies were conducted in accordance with all provisions of the Animal Welfare Act, the U.S. Government Principles Regarding the Care and Use of Animals, the Guide (Guide for the Care and Use of Laboratory Animals), National Research Council, Institute of Laboratory Animal Resources, the Division of Public Health Service Policy on Humane Care and Use of Laboratory Animals and the additional local policies of the Center of Comparative Medicine, UAB under approved Institutional Animal Care and Use Committee (Protocol # 141009960).

Abstract

Introduction: Major histocompatibility complex (MHC) class II professional antigen presenting cell-naïve CD4+ T-cell receptor complex interactions are necessary for adaptive immunity. MHC class II upregulation occurs in multiple cell types in autoimmune polyneuropathy patient biopsies, necessitating precise cellular pathway studies in tissue-specific autoimmunity.

Methods: Cryopreserved Guillain-Barré syndrome (GBS) patient sural nerve biopsies and sciatic nerves from the severe murine experimental autoimmune neuritis (sm-EAN) GBS model were studied. Cultured conditional ready MHC Class II antigen A-alpha chain (H2-Aa) embryonic stem cells were used to generate H2-Aa$^{flox/+}$ C57BL/6 mice. Mice were backcrossed and intercrossed to the SJL background to generate H2-Aa$^{flox/flox}$ SJL mice, bred with hemizygous Tamoxifen-inducible von Willebrand factor Cre recombinase (vWF-iCre/+) SJL mice to generate H2-Aa$^{flox/flox}$; vWF-iCre/+ to study microvascular endothelial cell adaptive immune responses. Sm-EAN was induced in Tamoxifen-treated H2-Aa$^{flox/flox}$; vWF-iCre/+, H2-Aa$^{flox/flox}$; +/+, H2-Aa$^{+/+}$; vWF-iCre/+ and untreated H2-Aa$^{flox/flox}$; vWF-iCre/+ adult female SJL mice. Neurobehavioral, electrophysiological and histopathological assessments were performed at predefined time points.

Results: Endoneurial endothelial cell MHC class II expression was observed in normal and inflamed human and mouse peripheral nerves. Tamoxifen-treated H2-Aa$^{flox/flox}$; vWF-iCre/+ mice were resistant to sm-EAN despite extensive MHC class II expression in lymphoid and non-lymphoid tissues.

Discussion: A conditional MHC class II knockout mouse to study cell- and time-dependent adaptive immune responses *in vivo* is developed. Initial studies show microvascular endothelial cell MHC class II expression is necessary for peripheral nerve specific autoimmunity, as advocated by human *in vitro* adaptive immunity and *ex vivo* transplant rejection studies.

Key words: antigen presentation, autoimmunity, endothelial cell, major histocompatibility complex, peripheral nerves

Introduction

Primary adaptive immunity is initiated by exogenous antigen presentation to naïve CD4+ T-cells by "professional" myeloid antigen-presenting cells (APCs), e.g. dendritic cells, macrophages and B-cells, residing in secondary lymphoid organs.[1-4] In response to antigen recognition, naïve CD4+ T-cells expand and differentiate into effector and memory T-cells. The latter persist long after initial antigen clearance, and rapidly initiate secondary tissue responses following specific antigen reappearance.[1,4,5] Molecular mimicry is a mechanism by which infections, chemical agents and tissue injury (e.g. surgery) induce autoimmunity due to similarities between exogenous and endogenous peptides that result in autoreactive T- or B-cell activation in susceptible individuals.[3] Patient age, sex, genetic and epigenetic factors, prior multiple pathogen exposure, vaccination status, microbiome and other environmental exposures are some molecular mimicry influencing factors.[2-4] Dysregulated central tolerance, non-specific bystander activation, persistent antigenic stimuli and epitope shift/ drift also contribute to autoimmune disease initiation, relapse and persistence.[2]

Molecular mimicry is considered essential to GBS immunopathogenesis, with pathogenic antibodies generated against peripheral axon complex ganglioside and peripheral nerve myelin proteins/ lipids.[6-8] Definitive pathogenic antibodies responsible for the most common GBS variant worldwide, acute inflammatory demyelinating polyradiculoneuropathy (AIDP), remain elusive. Histopathological evaluation of AIDP-variant GBS patient biopsies indicate hematogenous leukocyte trafficking with monocyte/ macrophage, CD4+ and CD8+ T-cell and B-cell/ plasma cell infiltration associated with demyelination and axonal degeneration.[9-14] Importantly, electron-dense intercellular contacts between endoneurial endothelial cells, indicative of tight junctions, are present during pathogenic leukocyte trafficking in AIDP, supporting the notion that leukocyte trafficking across microvessels is a coordinated, sequential process (i.e. multistep paradigm of leukocyte trafficking) dependent on dynamic leukocyte-

endothelial cell interactions *in vivo* as seen *in vitro*,[13,15-19] rather passively due to a "leaky" blood-nerve barrier (BNB).

The initial directional cues for antigen-specific effector or autoreactive leukocyte trafficking into peripheral nerves during autoimmunity are unknown. How do recently activated effector leukocytes generated in secondary lymphoid organs, efficiently migrate to peripheral nerves and nerve roots alone to induce demyelination and axonal degeneration in susceptive individuals as part of aberrant adaptive immune response? Based on human *in vitro* and *ex vivo* studies, effector memory CD4+ T-cells are recruited following local microvasculature activation by inflammatory cytokines, pathogen-associated or damage-associated molecular patterns.[1,5] Selective chemokine and cell adhesion molecules attract and facilitate leukocyte subset transmigration.[20-22] Endothelial cell MHC Class II antigen presentation also facilitates CD4+ effector memory CD4+ T-cell activation and proliferation, with increased evidence supporting a role in antigen-specific T-cell transmigration and allograft transplant rejection.[23-27]

Increased MHC Class II (also known as human leukocyte antigen [HLA]-subtype D) expression occurs on multiple cell types: monocytes/ macrophages, Schwann cells, infiltrating T-cells, perineurial cells and BNB-forming endoneurial endothelial cells, in inflammatory neuropathy patient nerve biopsies.[28-33] Schwann cells possess the required molecular machinery to serve as facultative APCs during adaptive immune responses *in vitro* and *in vivo*.[31,34] A selective Schwann cell MHC class II knockout mouse model demonstrated a role for Schwann cell adaptive immune responses in preventing chronic nociception following chronic constriction nerve injury.[35] Human and mouse BNB-forming endoneurial endothelial cells also possess the molecular machinery to serve as secondary antigen presenting cells during adaptive immune responses.[36,37]

Mouse MHC class II molecules consists of a 33 kDa α-chain covalently linked to a 28 KDa β-chain. Mice possess 2 α-chains, H2-Aa and H2-Ea, homologous to human HLA-DQA1 and HLA-DRA molecules respectively. Classical (H2-Ab1 and H2-Eb1) and nonclassical (H2-Ob [H2-Ab2] and H2-Eb2) β-chains can bind to the highly conserved α-chain to form effective antigen presentation MHC class II complexes.[38] Interestingly, mouse strains commonly used to model human autoimmune disorders (including AIDP) such as C57BL/6, SJL and non-obese diabetic mice are H2-Ea (also known as I-E) germline knockouts (see lists from BioLegend: https://www.biolegend.com/Files/Images/media_assets/support_resource/BL_MouseAlloantigen s_041116.pdf and BD Biosciences: https://www.bdbiosciences.com/content/dam/bdb/marketing-documents/mouse_alloantigens_chart.pdf). This implies that experimental autoimmunity in these mouse strains are H2-Aa-dependent. In order to determine which APCs are necessary for peripheral nerve-specific autoimmunity *in vivo*, we sought to develop a conditional H2-Aa knockout mouse strain.

Methods

Development of Tamoxifen-inducible microvascular-specific conditional H2-Aa knockout SJL mice

The conditional ready heterozygous H2-Aa[tm1a(KOMP)Wtsi] embryonic stem (ES) cells, clone 1 (H2-Aa G03 (EPD0585_5_G03) derived from the JM8A3.N1 Agouti C57BL/6N mouse cell line (consisting of 61-70% euploid cells) was purchased from the University of California Davis Knockout Mouse Program (KOMP; Research Resource Identifier (RRID): MMRRC_056665-UCD; Mouse Genome Informatics: MGI:4458506). ES cell genotyping performed by KOMP demonstrated a Y chromosome, and the target was confirmed by Long Range polymerase chain reaction (PCR) at the vector's 5' end. Conditional potential was verified by identifying the 3' "locus of crossing over in P1" (loxP) sequence using quantitative Taqman PCR relative to an

internal genomic reference. The H2-Aa G03 ES cell line was cultured and expanded by the University of Michigan Transgenic Animal Model Core, following validated KOMP protocols (https://www.komp.org/protocols.php).

Superovulated albino C57BL/6 mouse blastocysts were microinjected with H2-Aa ES cells and transferred to pseudopregnant recipients, generating H2-Aa ES cell-mouse chimeras. All primers used in this study were produced by the UAB Heflin Center Genomics Core/ Integrated DNA technologies (www.idtdna.com). DNA amplification was performed using a Techne TC-412 Thermal cycler with specific PCR programs shown in Supplementary Table 1, unless otherwise stated. Tail snip genotyping was performed to detect mice with the complete H2-Aa transgene (i.e. the H2-Aa targeted sequence [exons 2, 3, 4 and 5' end of exon 5] flanked by 5' and 3' loxP sites and neomycin resistance selection cassette) based on KOMP protocols using the following primers: 5' loxP Forward Primer 5'- AATCTGTGCCTTGCTGATGCTTACC-3' and Reverse Primer 5'- TCTACCATCCTGACTGCCTTGTTCC-3' (amplicon size 652 base pairs [bp] in wildtype and 870 bp with floxed allele); 3' loxP Forward Primer 5'- GAGATGGCGCAACGCAATTAATG-3' and Reverse Primer 5'- CTGGCTCCAGTAAGCTCCAAAATGG-3' (amplicon size 279 bp with floxed allele); and neomycin resistance selection cassette (amplicon size 654 bp) Forward Primer 5'- GGGATCTCATGCTGGAGTTCTTCG-3' and Reverse Primer 5' TCTACCATCCTGACTGCCTTGTTCC-3'.

6-week old male albino C57BL/6 H2-Aa chimeras were bred with female albino C57BL/6 flippase o (flpo) transgenic mice[39] every 2 weeks to delete flippase recombinase target (FRT)-flanked β-galactosidase reporter and neomycin resistance selection cassette in offspring by the University of Michigan Transgenic Animal Core. This was to generate hemizygous flpo

recombinase mice heterozygous for only the floxed H2-Aa targeted gene sequence (i.e. albino C57BL/6 H2-Aa$^{flox/+}$). Flpo transgene genotyping was performed as follows: flpo Forward Primer 5'- TGAGCTTCGACATCGTGAAC-3' and flpo Reverse Primer 5'-CAGCATCTTCTTGCTGTGG - 3'. PCR amplification was performed by adding 1.0 μL purified tail snip genomic deoxyribonucleic acid (DNA) to a mixture of 0.5 μL each of forward and reverse primers from a 10 μM stock concentration with 2.5 μL of 10X PCR buffer, 0.2 μL of 5U/ μL Taq DNA polymerase, 0.5 μL of deoxyribonucleotide triphosphate (dNTP) mix (10 mM each), 0.75 μL of 50 mM MgCl$_2$ and 19.05 μL of sterile molecular grade ddH$_2$O, with a total of 25 μL PCR reaction mixture.

PCR products were loaded on a 3% agarose gel in 1X TAE buffer (40 mM **T**ris base, 20 mM **A**cetic acid, and 1 mM **E**thylenediaminetetraacetic acid [EDTA]) containing 0.01% MilliporeSigma™ GelRed™ Nucleic Acid Stain (Fisher Scientific, catalog # SCT123) with electrophoresis performed at 65V for 1 hour to detect the 230 bp transgene amplicon. GeneRuler 100 bp DNA Ladder (ThermoFisher scientific, catalog # FERSM0242) was used to confirm band size for all PCR assays. Direct or reverse digital gel images were generated using an AlphaImager HP image documentation system (Cell Biosciences) attached to a Sony ICX267AL 1.39 Megapixel charged-coupled device (CCD) camera and processed using the AlphaView software program for all PCR assays.

6-week old male hemizygous flpo recombinase albino C57BL/6 H2-Aa$^{flox/+}$ mice were bred with female albino C57BL/6 wildtype mice every 2 weeks, and genetically confirmed albino C57BL/6 H2-Aa$^{flox/+}$ mice were backcrossed with wildtype C57BL/6 mice for 10 generations to generate congenic C57BL/6 H2-Aa$^{flox/+}$ (officially designated as C57BL/6-*H2-Aa$^{tm1c(KOMP)Wtsi}$*/UbeeMmmh; Mutant Mouse Resource and Research Center [MMRRC] citation ID: RRID:MMRRC_046053-

MU). Genotyping was performed to detect the H2-Aa targeted gene sequence at the 5' and 3' loxP sites using the previously described KOMP protocol.

In order to study adaptive immune responses in severe murine experimental autoimmune neuritis (sm-EAN), C57BL/6 H2-Aa$^{flox/+}$ mice were backcrossed to the SJL background by speed congenics, performed at Charles River using their proprietary Marker-Assisted Accelerated Backcrossing (MAX-BAX$^®$) protocol. Due to H2-Aa sequence differences in exon 2 between SJL and C57BL/6 mice, H2-Aa SJL transgene genotyping was performed as follows: 5' loxP Forward Primer 5'-GCACCATGAATCTGCAAGTGAACA-3' and Reverse Primer 5'-TCTACCATCCTGACTGCCTTGTTCC-3' (amplicon size: 652 bp wildtype, and 870 bp floxed allele); 3' loxP Forward Primer 5'- GAGATGGCGCAACGCAATTAATG-3' and Reverse Primer 5'- CTGGCTCCAGTAAGCTCCAAAATGG-3' (amplicon size 279 bp floxed allele, unchanged from C57BL/6). PCR amplification was performed by adding 1.0 µL purified tail snip genomic DNA to a mixture of 0.5 µL each of forward and reverse primers from a 20 µM stock concentration with 12.5 µL of 2X Promega GoTaq$^®$ Green Master Mix (catalog # PRM5123) and 10.5 µL sterile ddH$_2$O, with a total of 25 µL PCR reaction mixture. PCR products were loaded on a 2% agarose gel in 1X TAE buffer containing 0.01% MilliporeSigma™ GelRed™ Nucleic Acid Stain (Fisher Scientific, catalog # SCT123) with electrophoresis performed at 200V for 30 minutes for the 3' loxP sequence reaction and 40 minutes of the 5' loxP sequence reaction. Gels were visualized, imaged and processed as previously described.

Following complete backcross, SJL H2-Aa$^{flox/+}$ mice were intercrossed to generate SJL H2-Aa$^{flox/flox}$ mice (SJL.B6-*H2-Aa$^{tm1c(KOMP)Wtsi}$*/UbeeMmmh; RRID: MMRRC_071292-MU). In order to study potential endothelial cell adaptive immune responses in sm-EAN, SJL H2-Aa$^{flox/flox}$ mice were bred with hemizygous Tamoxifen-inducible von Willebrand factor Cre recombinase SJL mice (vWF-iCre/+; SJL.Cg-Tg(VWF-Cre/ERT2)C1014/UbeeMmmh; RRID: MMRRC_071293-

MU), in which Cre recombinase expression is driven by a human microvascular-specific von Willebrand factor (vWF) promoter DNA sequence[40,41] after Tamoxifen injection. Sciatic nerve microvascular endothelial cell Cre expression was verified using two fluorescent reporter mouse strains[42-44] (Supplementary Figure 1). Detailed online information describing this mouse strain is available (https://doi.org/10.1101/2023.07.24.550419). Cre recombinase-mediated microvascular endothelial cell H2-Aa gene deletion occurs in SJL H2-Aa[flox/flox]; vWF-iCre/+ mice, i.e. a conditional microvascular endothelial cell-specific MHC Class II knockout mouse model.

Genotyping to detect the vWF-iCre transgene was performed as follows: vWF-iCre Forward Primer 5'-AATCTTTTCTCCTGCTTTAAAGAAATGTT-3' and vWF-iCre Reverse Primer 5'-ATCTGTGACAGTTCTCCATCAGGGATCT-3' (amplicon size 604 bp). PCR amplification was performed by adding 1.0 μL purified tail snip genomic DNA to a mixture of 0.5 μL each of forward and reverse primers from a 10 μM stock concentration with 12.5 μL of 2X Promega GoTaq® Green Master Mix (catalog # PRM5123) and 10.5 μL of sterile ddH$_2$O, with a total of 25 μL PCR reaction mixture.

Development of microvascular endothelial cell-specific MHC class II conditional knockout SJL mice

The strategy used to generate H2-Aa[flox/flox]; vWF-iCre/+ SJL mice, and genotyping data showing albino C57BL/6 H2-Aa ES cell chimera mice with the target construct; hemizygous flpo recombinase albino C57BL/6 H2-Aa[flox/+] mice with excision of the FRT-flanked β-galactosidase reporter and neomycin resistance selection cassette; derived C57BL/6 H2-Aa[flox/+] mice during backcross to congenic C57BL/6 background, followed by backcross and intercross to generate SJL H2-Aa[flox/flox] mice that were mated with Tamoxifen-inducible hemizygous vWF-iCre/+ SJL mice to generate H2-Aa[flox/flox]; vWF-iCre/+ SJL mice, are shown (**Figure 1)**.

Severe murine experimental autoimmune neuritis

8-9 week old female SJL H2-Aa[flox/flox]; vWF-iCre/+ mice were injected with 100 mg/kg Tamoxifen in corn oil i.p. for 5 consecutive days (resulting in expected maximal Cre-mediated DNA recombination 21 days after Tamoxifen injection, as demonstrated in mouse astroglia)[45] to delete H2-Aa in microvascular endothelial cells. Similarly Tamoxifen-injected age-matched female SJL H2-Aa[flox/flox]; +/+ mice (that lack the hemizygous vWF-iCre transgene), and H2-Aa^{+/+}; vWF-iCre/+ (that lack H2-Aa floxed alleles but possess the vWF-iCre transgene), as well as corn oil only-treated H2-Aa[flox/flox]; vWF-iCre/+ mice served as controls. 24 days after the final Tamoxifen injections, sm-EAN was induced via subcutaneous injections of bovine peripheral nerve myelin (BPNM) emulsified in Complete Freund Adjuvant (CFA), with Pertussis toxin and recombinant mouse interleukin (IL)-12 serving as co-adjuvants, as previously published.[13,46-49] 100% disease induction and progression occurs reliably in female mice. Daily weights and neurobehavioral tests (neuromuscular severity score, NMSS) were performed in experimental mice for 28 days (to expected peak severity with plateau), as previously published.[13,47-49]

Mouse motor nerve electrophysiology and tissue harvest

Bilateral sciatic and dorsal caudal tail (DCT) motor nerve electrophysiology was performed on day 28 post-induction under 100 mg/kg ketamine/ 10 mg/kg xylazine i.p, anesthesia using a portable electrodiagnostic system (Keypoint v5.11; Alpine Biomed Corp., Fountain Valley, California, USA), as previously published.[13,47,49,50] Immediately afterwards, mice were euthanized under deep anesthesia via cervical disarticulation, and the sciatic nerves, proximal tail, inguinal lymph nodes and spleen were harvested from each mouse. The harvested tissues were immediately embedded in Scigen Tissue Plus[TM] Optimum Cutting Temperature® (OCT) Compound (Fisher Scientific, catalog # 23-730-571) or placed in cryovials and stored at -80°C until processed, or placed in fixative (3% glutaraldehyde [GTA] in 0.1M phosphate buffer or 4%

paraformaldehyde [PFA] in 1X phosphate buffered saline [PBS]) in glass vials at room temperature (RT) for further processing.

Sciatic nerve morphological assessment

A portion of the left sciatic nerve from each mouse was fixed for 12-15 hours in 3% GTA in 0.1M phosphate buffer at RT, post-fixed in 1% osmium tetroxide, and embedded in epoxy resin (plastic). 0.75 µm sections from 3-4 regions separated by $\geq$ 1000 µm were generated, mounted on glass slides, and stained with methylene blue to evaluate sciatic nerve morphology (axonal loss, demyelination, inflammation), as previously published.[13,47,49,51] Slides were visualized and representative digital photomicrographs taken using a Zeiss Axio Lab.A1 upright light microscope attached to a Nikon DS-Fi2 digital camera and processed using the Nikon Elements software.

Proximal tail decalcification and antigen retrieval

Proximal tail sections were fixed in 4% PFA in 1X PBS for 24 hours, rinsed three times for 10 minutes in 1X PBS and decalcified in 10% EDTA in 2% PFA in 1X PBS at 37°C for 2 weeks with continuous shaking at 43 revolutions per minute in a Bellco SciERA hot orbital shaker (catalog # 7745-22110), with decalcification buffer changed every 24 hours.[52] Decalcified tail sections were washed with 1X PBS, embedded in OCT compound and stored at -80°C until processed. 50 µm thick axial sections were placed on Fisherbrand™ ColorFrost™ Plus slides (Fisher Scientific, catalog # 12-550-18), air dried for 12-15 hours overnight at RT, and stored for ~6 hours at -20°C. Following air drying at RT for 1 hour, antigen retrieval was performed by incubating sections with 1% Sodium Dodecyl Sulfate (SDS) in 1X PBS for 5 minutes at RT.[53] Indirect immunohistochemistry was performed to detect DCT nerve and cutaneous inflammation.

Indirect fluorescent immunohistochemistry

OCT-cryopreserved archived sural nerve biopsies from two adults (aged 63 and 70) with histological evidence of an acute demyelinating neuritis consistent with AIDP-variant GBS, and two age- and sex-matched histologically normal controls were obtained from the Shin J. Oh Muscle and Nerve Histopathology Laboratory, UAB. OCT-cryopreserved sciatic nerves from a normal adult female SJL mouse and sm-EAN-affected mice from disease onset (day 10 post-induction) and during the early effector phase (day 15 post-induction) from prior experiments[47] were also obtained. These nerves were studied to confirm microvascular endothelial cell MHC Class II expression in normal and inflamed human and mouse peripheral nerves. Leukocyte MHC Class II expression in the sciatic nerves, tails, inguinal lymph nodes and spleens of Tamoxifen-treated female SJL H2-Aa[flox/flox]; vWF-iCre/+ mice (with microvascular endothelial cell H2-Aa gene deletion) and SJL H2-Aa[flox/flox]; +/+ mice (representative of mice with unaltered microvascular endothelial cell H2-Aa gene expression) following sm-EAN induction was studied to evaluate for peripheral nerve inflammation and retention of MHC class II expression in lymphoid and nonlymphoid organs.

Antibodies and lectin used for immunohistochemistry are listed in Supplementary Table 2. 10 µm thick axial sections were mounted on Fisherbrand™ Superfrost™ or ColorFrost™ Plus slides (Fisher Scientific, catalog # 12-550-14G and 12-550-18), air dried for 20-60 minutes at RT, fixed with ice cold acetone at -20°C for 10 minutes and washed twice with 1X Dulbecco's PBS (D-PBS) for 10 minutes. Sections were blocked with 10% normal goat serum (NGS) in 1X D-PBS, followed by incubation with primary antibodies in 2% NGS in 1X D-PBS at RT for 1 hour. After washing with 2% NGS in 1X D-PBS for 10 minutes, sections were incubated with secondary antibodies/ fluorescent lectin in 2% NGS in 1X D-PBS for one hour at RT in the dark. After washing with 1X D-PBS for 10 minutes, sections were stained with 0.45 µM 4′,6-diamidino-2-phenylindole (DAPI) in 1X PBS for 5 minutes at RT in the dark to detect nuclei, and washed

once with 1X D-PBS for 5 minutes. 50 µm thick fixed and decalcified axial cryostat tail sections were processed as above after antigen retrieval and 10 minute air drying, with 1X PBS as diluent and wash buffer. Sections were mounted using ProLong™ Gold Antifade aqueous mounting medium (ThermoFisher Scientific, catalog # P36930) or VECTASHIELD® antifade mounting medium (Vector Laboratories catalog # H100010) and coverslips placed and sealed with nail polish. Slides from the same experiments were processed immediately or stored at 4°C overnight for processing the following day.

Slides were visualized using a Nikon ECLIPSE Ci upright epifluorescent microscope attached to a Nikon DS-Qi2 monochromatic camera. Digital photomicrographs were generated and images were merged using the Nikon NIS Elements AS software program, as previously published.[13,51,54]

Statistical Analysis

Investigator-blinded data analyses were performed for all parameters using the GraphPad Prism® 6 statistical program (GraphPad Software, Inc., La Jolla, CA). The Mann-Whitney U-test or the Wilcoxon-Kruskall's Rank Sum Test was used to determine statistically significant differences between non-parametric variables while the one- or two-tailed unpaired Student's/Welch's t-test (or one-way analysis of variance) was used to evaluate parametric variables based on the Shapiro-Wilk test of normality (including measures of skew and kurtosis). The Holm-Sidak's test or Bonferroni post-test correction was used for multiple parametric variable comparisons, as previously published. Means are displayed, with individual data points or variations of the mean depicted as standard errors shown. Statistical significance is defined as a p-value < 0.05.

Results

MHC Class II expression in normal and inflamed human and mouse peripheral nerves

HLA-DR was expressed by BNB-forming endoneurial endothelial cells and cells with profiles consistent with endoneurial macrophages and innerlayer perineurial myofibroblasts in histologically normal adult sural nerves (**Figure 2 and Supplementary Figure 2**). Increased HLA-DR expression was observed in AIDP, with diffuse expression by cells with profiles consistent with Schwann cells, infiltrating leukocytes, endoneurial and epineurial vascular endothelial cells and perineurial myofibroblasts (**Figure 2 and Supplementary Figure 2**), as previously published.[28-33] H2-A was expressed by BNB-forming endoneurial endothelial cells and rare cells with profiles consistent with endoneurial macrophages in normal female SJL mouse sciatic nerves. There was increased expression by endoneurial endothelial cells at sm-EAN disease onset that persisted to the effector phase, associated with infiltrating leukocytes and perineurium expression (**Figure 2 and Supplementary Figure 2**). These studies show that MHC class II is constitutively expressed by BNB-forming endothelial cells in human and mouse peripheral nerves and upregulated during acute demyelinating neuritis in association with other peripheral nerve cells.

Effect of microvascular endothelial cell-specific MHC Class II conditional knockout on sm-EAN

The experimental design to study sm-EAN in age-matched female Tamoxifen-treated SJL H2-Aa$^{flox/flox}$; vWF-iCre/+, SJL H2-Aa$^{flox/flox}$; +/+ and H2-Aa$^{+/+}$; vWF-iCre/+ and corn oil only-treated H2-Aa$^{flox/flox}$; vWF-iCre/+ mice is shown in **Figure 3A**. H2-Aa$^{flox/flox}$; vWF-iCre/+ mice were resistant to sm-EAN based on NMSS scores, with tail weakness being the only abnormality seen in 3 of 8 mice studied. All other experimental mice with unaltered microvascular endothelial cell H2-Aa gene expression fully developed sm-EAN (**Figure 3B**). Although Tamoxifen-treated female SJL H2-Aa$^{flox/flox}$; vWF-iCre/+ mice appear to weigh less than mice

with unaltered H2-Aa gene expression (**Figure 3C**), no significant difference in mean % weight change was observed between sm-EAN experimental mice (**Figure 3D**), consistent with prior reports.[47,49]

Sciatic motor nerve electrophysiology at expected sm-EAN peak severity showed significantly higher mean compound motor action potential (CMAP) amplitudes, faster conduction velocities, shorter waveform durations and shorter distal latencies in Tamoxifen-treated female SJL H2-Aa[flox/flox]; vWF-iCre/+ compared to mice with unaltered microvascular endothelial cell H2-Aa gene expression (**Figure 4)**, consistent with NMSS scores. Similarly, DCT motor nerve electrophysiology at sm-EAN peak severity demonstrated similar findings to the sciatic nerve data, with the exception of the mean distal latencies (**Figure 5**). Since distal latency is dependent on terminal axon conduction and the neuromuscular junction conduction delay times following electrical stimulation, proximal tail histological evaluation to look for differences between Tamoxifen-treated sm-EAN-resistant female SJL H2-Aa[flox/flox]; vWF-iCre/+ and sm-EAN-affected SJL H2-Aa[flox/flox]; +/+ was performed. Representative motor nerve electrophysiology waveforms are shown in **Supplementary Figure 3**.

Semi-thin plastic-embedded sections at expected sm-EAN peak severity showed normal sciatic nerves in Tamoxifen-treated female SJL H2-Aa[flox/flox]; vWF-iCre/+ compared to inflammatory demyelination with axonal loss observed in female SJL H2-Aa[flox/flox]; +/+ mice (**Figure 6**). Interestingly, leukocyte infiltration was observed in extraneural connective tissue in sm-EAN-resistant H2-Aa[flox/flox]; vWF-iCre/+ mice, suggesting that effector leukocyte transmigration directional cues for peripheral nerve infiltration was altered following abrogated microvascular endothelial cell MHC class II expression. Indirect fluorescent immunohistochemistry at expected sm-EAN peak severity showed absent or rare sciatic nerve H2-A+ CD45+ leukocytes in Tamoxifen-treated female SJL H2-Aa[flox/flox]; vWF-iCre/+ mice compared to intense infiltration

observed in SJL H2-Aa^{flox/flox}; +/+ mice, indicative of inhibited inflammation (**Figure 7 and**

Supplementary Figure 4). Interestingly, perineurial H2-A expression was observed in

Tamoxifen-treated female SJL H2-Aa^{flox/flox}; vWF-iCre/+ mice, and increased diffuse H2-A

expression was observed in female SJL H2-Aa^{flox/flox}; +/+ mice with sm-EAN, consistent with

AIDP-GBS. These findings were also observed in DCT nerves (**Figure 7 and Supplementary**

Figure 4); however, H2-A expression was similarly observed in coccygeal bone marrow

leukocyte clusters between Tamoxifen-treated female SJL H2-Aa^{flox/flox}; vWF-iCre/+ and SJL H2-

Aa^{flox/flox}; +/+ mice. Cutaneous inflammation consisting of H2-A+ and H2-A- CD45+ leukocytes

occurred in Tamoxifen-treated H2-Aa^{flox/flox}; vWF-iCre/+ mice with tail weakness <u>without</u> DCT

nerve inflammation (**Figure 7 and Supplementary Figure 4**), providing an explanation for the

observed NMSS and prolonged mean distal latencies. Sm-EAN peak severity indirect

fluorescent immunohistochemistry showed H2-A expression by spleen and inguinal lymph node

CD45+ leukocyte subsets in Tamoxifen-treated female SJL H2-Aa^{flox/flox}; vWF-iCre/+ mice

(**Figure 8**). This provided evidence that microvascular endothelial cell-specific MHC class II

deletion did not inadvertently alter professional APC organization in secondary lymphoid organs.

Splenomegaly, with disorganized H2-A+ CD45+ leukocyte architecture was observed in sm-

EAN-affected Tamoxifen-treated H2-Aa^{flox/flox}; +/+ mice, as previously described in mice with

active autoimmune disease.[55,56]

Discussion

Our initial studies show that microvascular endothelial cell-specific H2-Aa knockout prevented

acute autoimmune demyelinating neuritis in female adult SJL mice, implying that BNB-forming

endothelial cell MHC Class II expression is necessary for antigen-specific peripheral nerve-

restricted autoimmunity. Comparative quantitative histopathological analyses were not

performed due to the observed "all-or-none" differences in inflammatory demyelination with

axonal loss in sm-EAN-affected mice with unaltered microvascular endothelial cell H2-Aa gene

expression compared to Tamoxifen-treated SJL H2-Aa^{flox/flox}; vWF-iCre/+ mice with

microvascular endothelial cell-specific H2-Aa gene deletion. This supports human *in vitro* data that demonstrated vascular endothelial cell capacity to promote antigen presentation, effector memory T-cell proliferation, and antigen-specific CD4+ T-cell migration.[1,22,24-26] Importantly, leukocyte H2-A expression was not unexpectedly altered in Tamoxifen-treated H2-Aa[flox/flox]; vWF-iCre/+ SJL mouse bone marrow or secondary lymphoid organs to suggest altered professional APC function required to initiate adaptive immune responses to exogenous antigens. Despite the limitations of human autoimmune disease murine models, observations from this study provide pathogenic insights into human AIDP due to similarities with sm-EAN.

Sm-EAN reliably occurs in 100% of female SJL mice and requires subcutaneous BPNM-CFA and Pertussis toxin, with more severe disease observed with recombinant mouse IL-12 as a co-adjuvant.[46] Histological characterization of inflammatory demyelination with axonal loss in sm-EAN has been previously published.[13,47,49] BPNM-CFA alone is insufficient to induce sm-EAN and Pertussis toxin has been shown to potently activate MHC Class II expression in lymphoid and nonlymphoid target organs and induce proliferation of antigen-specific CD4+ T-helper (Th) 1 and Th2 cells in addition to histamine- and cytokine-mediated increased microvascular permeability.[57,58] Recombinant mouse IL-12 promotes differentiation of naïve CD4+ T-cells to CD4+ Th1 cells. MHC class II upregulation occurred in BNB-forming endoneurial endothelial cells at sm-EAN onset and was associated with leukocyte transmigration *in situ*. Diffuse MHC class II expression occurred in sm-EAN at peak severity, as seen in AIDP-GBS. Sural nerve biopsy from AIDP-GBS patients at disease onset is not ethically feasible to validate sm-EAN data. However, MHC class II was constitutively expressed by histologically normal adult endoneurial endothelial cells to suggest an important role in normal immune surveillance.

SJL mouse adaptive immune responses require H2-Aa, as these mice are H2-Ea null and redundancy exists for β-chain molecules.[38] H2-Aa (with human homolog HLA-DQA1) is highly

conserved between species, suggesting an essential role in adaptive immunity. Our construct selectively excises exons 2, 3, 4 and the 5' portion of exon 5 in Cre recombinase-expressing cells, generating a nonfunctional H2-Aa protein. Polymorphisms (e.g. at exon 2) could explain differential susceptibility to sm-EAN between SJL and C57BL/6 mice. Although conclusive HLA class II susceptibility risk genes have not been identified in GBS,[59-62] HLA-DQA1 is a plausible target for deep sequencing in worldwide AIDP-GBS patient cohorts based on sm-EAN data. Further work is required to confirm these initial results, determine whether delayed inflammation occurs with antigen persistence >28 days and confirm normal MHC Class II antigen presentation cell function in sm-EAN-resistant Tamoxifen-treated SJL H2-Aa$^{flox/flox}$; vWF-iCre/+ mice. The molecular determinants and signaling mechanisms required for antigen-specific effector memory CD4+ T-cell engagement with endoneurial endothelial cells via MHC class II as a prerequisite for pathogenic leukocyte transmigration and acute demyelinating neuritis in sm-EAN, with potential relevance to immune-mediated polyneuropathies, needs to be elucidated.

The conditional H2-Aa knockout mouse strains provide essential tools to study antigen presentation by different cells during tissue- or organ-specific adaptive immune responses in a time-dependent manner. Tamoxifen-induced Cre recombination effectively and maximally excises the floxed H2-Aa gene three weeks after 5 consecutive daily injections,[45] facilitating timed gene deletion to disease model phase. Tissue or organ grafts from mice with microvascular endothelial cell-specific MHC class II knockout could be used to study allograft and xenograft rejection *in vivo.* Studies using living mice with intact immune systems are advantageous over human *in vitro* and *ex vivo* studies, provided such studies are guided by patient observational data. Improved understanding of molecular mimicry, tissue-specific autoimmunity and transplant rejection obtained from conditional MHC class II knockout mouse studies should advance knowledge and guide targeted immune drug development strategies.

Figure Legends

Figure 1. Development of microvascular endothelial-cell specific MHC class II conditional knockout SJL mouse strain. The strategy used to conditionally knockout MHC class II (H2-Aa) based on the KOMP-designed DNA construct is shown in **A**. The H2-Aa targeted allele was constructed by placing loxP sequences on the 5' and 3' ends of gene target region, and FRT-flanked sequences between β-galactosidase reporter and neomycin resistance selection cassette inserted 5' to the H2-Aa targeted DNA. Following flpo recombinase-mediated excision, the conditional ready allele is produced. Excision at the loxP sites generates the H2-Aa knockout allele in cells/ tissues induced to express Cre recombinase.

Representative digital reverse gel images from H2-Aa ES cell chimera albino C57BL/6 mouse tail snip genotyping for the 3' loxP (3LP) sequence, neomycin selection cassette (N or Neo), wildtype allele (WT) and 5' loxP (5LP) sequence, with blank (b) and glyceraldehyde-3-phosphate dehydrogenase (G) internal controls is shown in **B**. Mice with the intact targeted H2-Aa construct show PCR products at 3LP, N, WT, 5LP and G. Representative digital reverse gel images from offspring of male albino C57BL/6 H2-Aa$^{flox/+}$ chimera mice bred with female albino C57BL/6 flpo transgenic mice genotyped for the H2-Aa 3' loxP, Neo and 5' loxP sequences, and the flpo transgene show albino C57BL/6 flpo recombinase H2-Aa$^{flox/+}$ mice with excision of the β-galactosidase reporter and neomycin resistance selection cassette, are shown in **C** (asterisk). Following mating with albino C57BL/6 mice to select heterozygous mice without the flpo transgene, albino C57BL/6 H2-Aa$^{flox/+}$ mice were backcrossed to the C57BL/6 background, to generate congenic C57BL/6 H2-Aa$^{flox/+}$ mice, as shown in **D** (asterisk). Following backcross to the congenic SJL background and intercross to generate SJL H2-Aa$^{flox/flox}$ mice; these mice were bred with hemizygous Tamoxifen-inducible vWF-iCre transgenic mice. Representative gel images following tail snip genotyping of the SJL H2-Aa 3' loxP and 5' loxP sequences and the

vWF-iCre transgene show SJL H2-Aa^{flox/flox}; vWF-iCre/+ mice (asterisk) in **E**. L represents DNA size ladder and numbers indicate size markers or size of expected PCR products in B-E.

Figure 2. MHC Class II expression in normal and inflamed human and mouse peripheral nerves. Representative merged digital photomicrographs show HLA-DR expression (red fluorescence) by BNB-forming endoneurial endothelial cells (green fluorescence) in a histologically normal adult human sural nerve at low magnification (**A**, white arrows), with expression in the inner perineurium (p) also seen. Higher magnification images show normal endoneurial endothelial cell membrane and cytoplasmic HLA-DR expression (**B-C**). Increased diffuse HLA-DR expression (red fluorescence) is seen in AIDP patient sural nerves involving endoneurial endothelial cells (green fluorescence)cells with profiles consistent with Schwann cells and infiltrating leukocytes, as well as (**D-E**, white arrows) and the perineurium (p). Higher magnification images show endoneurial microvessel luminal (endothelial cell) and basement membrane HLA-DR expression in AIDP (**F**).

H2-A expression (red fluorescence) by BNB-forming endoneurial endothelial cells (green fluorescence) is also seen in an adult female SJL mouse sciatic nerve (**G**, white arrow) and cells with profiles consistent with endoneurial macrophages, with a higher magnification image showing normal endoneurial endothelial cell luminal membrane and cytoplasmic H2-A expression (**H**). Increased H2-A expression (red fluorescence) is seen at sm-EAN onset, with expression by endoneurial endothelial cells (green fluorescence; white arrows), perineurium (p) and cells consistent with infiltrating leukocytes (**I**). Higher magnification images at sm-EAN onset show infiltrating cells associated with endoneurial microvessel H2-A expression (**J-L**), suggesting a trafficking role for H2-A at sm-EAN onset. H2-A expression (red fluorescence) by endoneurial endothelial cells (green fluorescence; white arrows), the perineurium (p) and profiles consistent with infiltrating leukocytes (asterisk) with increased diffuse endoneurial H2-A

background expression is observed during the early sm-EAN effector phase (**M**). Scale bars: A = 100 μm, B-C = 20 μm, D = 200 μm, E = 100 μm, F = 5 μm, G = 50 μm, H = 10 μm, I = 25 μm, J-L = 5 μm, M = 50 μm.

Figure 3. Sm-EAN experimental design and effect of sm-EAN on NMSS and weights in Tamoxifen-treated female SJL H2-Aa$^{flox/flox}$; vWF-iCre/+, H2-Aa$^{flox/flox}$; +/+ and H2-Aa$^{+/+}$; vWF-iCre/+ mice and corn oil only-treated SJL H2-Aa$^{flox/flox}$; vWF-iCre/+ mice. The experimental strategy used to induce and evaluate sm-EAN in experimental mice is shown in **A**. Microvascular endothelial cell H2-Aa knockout is associated with resistance to sm-EAN based on NMSS (**B**, p <0.001 from day 13, and p <0.0001 for the series from day 13 to 28 post-induction, Mann-Whitney U-test), with no significant differences in mean body weight (**C**) or % mean change in body weight (**D**) between experimental mice (p >0.05, ANOVA). DCTN: dorsal caudal tail nerve, IL = iliac, IN= inguinal, PO = popliteal, rmIL-12: recombinant mouse IL-12. Error bars indicate standard errors of the means. N= 8 for Tamoxifen-treated H2-Aa$^{flox/flox}$; vWF-iCre/+, 7 for Tamoxifen-treated H2-Aa$^{flox/flox}$; +/+ and 4 for both Tamoxifen-treated H2-Aa$^{+/+}$; vWF-iCre/+ and corn oil only-treated SJL H2-Aa$^{flox/flox}$; vWF-iCre/+ mice.

Figure 4. Sciatic nerve motor electrophysiology in Tamoxifen-treated female SJL H2-Aa$^{flox/flox}$; vWF-iCre/+, H2-Aa$^{flox/flox}$; +/+, and H2-Aa$^{+/+}$; vWF-iCre/+ mice and corn oil only-treated SJL H2-Aa$^{flox/flox}$; vWF-iCre/+ mice. Bar histograms show significantly higher mean distal and proximal CMAP amplitudes (indicative of axon numbers and integrity) and conduction velocity (indicative of myelination status of the fastest conducting axons) in microvascular endothelial cell H2-Aa knockout mice. Significantly reduced mean distal latency (indicative of distal axon and neuromuscular junction conduction delay time) and distal and proximal CMAP waveform durations (indicative of myelinated axon conduction synchrony) is seen in these mice compared to control mice with unaltered microvascular endothelial cell H2-Aa gene expression

that fully develop electrophysiological features of a severe demyelinating neuritis with secondary axonal loss, consistent with sm-EAN. * indicate $p < 0.05$, ANOVA. Individual data points are shown for each sciatic nerve studied. N = 8 for Tamoxifen-treated H2-Aa$^{flox/flox}$; vWF-iCre/+, 7 for Tamoxifen-treated H2-Aa$^{flox/flox}$; +/+ and 4 for both Tamoxifen-treated H2-Aa$^{+/+}$; vWF-iCre/+ and corn oil only-treated SJL H2-Aa$^{flox/flox}$; vWF-iCre/+ mice.

Figure 5. DCT nerve motor electrophysiology in Tamoxifen-treated female SJL H2-Aa$^{flox/flox}$; vWF-iCre/+, H2-Aa$^{flox/flox}$; +/+, and H2-Aa$^{+/+}$; vWF-iCre/+ mice and corn oil only-treated SJL H2-Aa$^{flox/flox}$; vWF-iCre/+ mice. Bar histograms show significantly higher mean distal and proximal CMAP amplitudes and conduction velocity in microvascular endothelial cell H2-Aa knockout mice. Significantly reduced mean distal and proximal waveform durations are seen in these mice compared to age-matched controls without Cre recombinase-mediated microvascular endothelial cell H2-Aa gene deletion that fully develop electrophysiological features of a severe demyelinating neuritis with secondary axonal loss, consistent with sm-EAN. No significant difference in mean distal latency is seen in experimental mice. * indicates $p < 0.05$, and n.s. = not significant ($p > 0.05$, ANOVA). Individual data points are shown for each DCT nerve studied. N = 8 for Tamoxifen-treated H2-Aa$^{flox/flox}$; vWF-iCre/+, 7 for Tamoxifen-treated H2-Aa$^{flox/flox}$; +/+ and 4 for both Tamoxifen-treated H2-Aa$^{+/+}$; vWF-iCre/+ mice and corn oil only-treated SJL H2-Aa$^{flox/flox}$; vWF-iCre/+ mice.

Figure 6. Comparative sciatic nerve morphology in Tamoxifen-treated female SJL H2-Aa$^{flox/flox}$; vWF-iCre/+ and H2-Aa$^{flox/flox}$; +/+ mice. Representative digital photomicrographs of Toluidine blue-stained semi-thin plastic-embedded axial sections show normal sciatic nerve morphology in microvascular endothelial cell H2-Aa knockout mice at low (**A, B**) and higher (**E, F**) magnification, with leukocyte infiltrates seen in the epineurial and extraneural connective tissue (**A and E**, red arrows). This is in contrast to inflammatory cell infiltration, demyelination

and axonal loss (black arrows) seen in sm-EAN-affected mice without microvascular endothelial cell H2-Aa gene deletion at low (**C-D**) and higher (**G-I**) magnification. Scale bars: A-D = 200 μm, E-I = 100 μm.

Figure 7. Comparative sciatic nerve and tail indirect fluorescent immunohistochemistry in Tamoxifen-treated female SJL H2-Aa$^{flox/flox}$; vWF-iCre/+ and H2-Aa$^{flox/flox}$; +/+ mice. Representative digital photomicrographs show perineurial (p) and rare perineurial and endoneurial H2-A+ and H2-A- CD45+ leukocytes in the sciatic nerves of microvascular endothelial cell H2-Aa knockout mice (**A-B**, white arrows). This is in contrast to diffusely increased H2-A expression and multifocal endoneurial H2-A+ CD45+ leukocyte infiltration observed in sm-EAN affected mice without H2-Aa gene deletion (**C-E**, white arrows). DCT nerve endoneurial H2-A+ CD45+ leukocyte infiltration is minimal in a microvascular endothelial cell H2-Aa knockout mouse at low (**F**) and higher (**G,** white arrows) magnification, in contrast to diffusely increased H2-A and multifocal endoneurial H2-A+ CD45+ leukocyte infiltration (white arrows) in an sm-EAN affected mouse without H2-Aa gene deletion at low (**H**) and higher (**I**) magnification. Clusters of coccygeal bone marrow H2-A+ CD45+ leukocytes (asterisk) are seen in both microvascular endothelial cell H2-Aa knockout mice (**J**) and mice without H2-Aa gene deletion (**K**). Epidermal and dermal inflammation consisting mainly of H2-A+ CD45+ leukocytes is seen in a microvascular endothelial cell H2-Aa knockout mouse with tail weakness without DCT nerve inflammation (**L-M**, white arrows). Local extraneural tissue inflammation with edema provides an explanation for similar mean DCT nerve distal latencies in microvascular endothelial cell H2-Aa knockout mice and sm-EAN-affected mice without H2-Aa gene deletion. Non-specific red and green fluorescence is seen in all tail muscle fibers. Scale bars: A-E = 50 μm, F and H = 100 μm, G and I = 50 μm, J-M = 100 μm.

Figure 8. Comparative spleen and inguinal lymph node indirect fluorescent immunohistochemistry in Tamoxifen-treated female SJL H2-Aa^{flox/flox}; vWF-iCre/+ and H2-Aa^{flox/flox}; +/+ mice. Representative digital photomicrographs from the spleen of a microvascular endothelial cell H2-Aa knockout mouse show organized large foci of H2-A+ and H2-A- CD45+ leukocytes at low (**A-C**) and higher (**P-R**) magnification. Disorganized diffuse and small foci of H2-A+ CD45+ leukocytes are seen in an sm-EAN-affected mouse without H2-Aa gene deletion with massive splenomegaly (**D-K**). Disorganized, but larger foci of H2-A+ CD45+ leukocytes are seen in an sm-EAN-affected mouse without H2-Aa gene deletion with splenomegaly at low (**L-O**) and higher (**S-V**) magnification. H2-A+ spleen sinusoidal endothelial cells in an sm-EAN affected mouse without H2-Aa gene deletion with splenomegaly (white arrow) is shown in **N**. Diffuse H2-Aa+ and H2-Aa- CD45+ leukocytes are seen in the inguinal lymph node of a microvascular endothelial cell H2-Aa knockout mouse resistant to sm-EAN (**W-DD**), as seen in sm-EAN affected mice without H2-Aa gene deletion. Scale bars: A-O = 100 µm, P-V = 50 µm, W-Z = 100 µm, AA-DD = 50 µm.

Supplementary Figure 1. vWF-iCre/+ mouse sciatic nerve microvascular endothelial cell Cre recombinase expression. Representative digital photomicrographs of paraformaldehyde-fixed, sucrose-cryopreserved cryostat axial sciatic nerve sections from two Ai14^{flox/flox}; vWF-iCre/+ SJL 2nd generation mice show tdTomato (tdT; red fluorescent protein) expression co-localizing with DyLight 488-conjugated *Lycopersicon Esculentum* (Tomato) Lectin (TL, the most sensitive marker of mouse vascular endothelial cells that binds to [GlcNAc] 1,3-N-acetylglucosamine, ThermoFisher Catalog #: L32470) green fluorescence expression, consistent with microvascular endothelial cell-specific Cre recombinase expression following Tamoxifen-induced recombination in the endoneurium (white arrows) and epineurium (asterisk), as shown in **A-H**. tdT expression was absent from the sciatic nerves in control mice lacking the vWF-iCre transgene (not shown). Higher magnification cropped digital photomicrographs of

sciatic nerve endoneurial microvessels further demonstrate tdT expression to support specific Tamoxifen-inducible Cre recombinase expression are shown in **I-L**. Further details are available online at: https://doi.org/10.1101/2023.07.24.550419. Scale bars: A-H = 100 µm, I-L= 50 µm.

Supplementary Figure 2. MHC Class II expression in normal and inflamed human and mouse peripheral nerves (expanded). Representative digital photomicrographs of unmerged and merged images from Figure 2 are shown. Scale bars: A-D = 100 µm, E-H = 20 µm, I-L = 5 µm, M-P = 100 µm, Q-R = 200 µm, S-V = 5 µm, W-Z = 50 µm, AA-DD = 10 µm, EE-HH = 25 µm, II-TT = 5 µm, UU-XX = 50 µm.

Supplementary Figure 3. Sciatic and DCT nerve motor electrophysiology. Representative digital waveforms following distal (upper waveform, green) and proximal (lower waveform, red) motor nerve stimulation of experimental mouse sciatic and DCT nerves 28 days after sm-EAN induction are shown. Normal sciatic nerve waveforms are seen in an sm-EAN-resistant Tamoxifen-treated female SJL H2-Aa$^{flox/flox}$; vWF-iCre/+ mouse (**A**), compared to reduced compound motor action potential (CMAP) amplitudes and total waveform durations observed in sm-EAN-affected Tamoxifen-treated H2-Aa$^{flox/flox}$; +/+ mice (**B-C**). Similarly, normal DCT nerve waveforms are seen in an sm-EAN-resistant Tamoxifen-treated female SJL H2-Aa$^{flox/flox}$; vWF-iCre/+ mouse (**D**), compared to reduced CMAP amplitudes and total waveform durations observed in sm-EAN-affected Tamoxifen-treated H2-Aa$^{flox/flox}$; +/+ mice (**E-F**, with the latter showing marked temporal dispersion).Similarly motor electrophysiology is observed in sm-EAN-affected Tamoxifen-treated H2-Aa$^{+/+}$; vWF-iCre/+ and corn oil only-treated SJL H2-Aa$^{flox/flox}$; vWF-iCre/+ mice (not shown). Waveform sensitivity (in mV per division [D], upper left), sweep speed (in ms/D, upper right) and stimulus intensity required to achieve supramaximal stimulus (in mA, above each waveform to the right) are shown.

Supplementary Figure 4. Comparative sciatic nerve and tail indirect fluorescent immunohistochemistry in Tamoxifen-treated female SJL H2-Aa^{flox/flox}; vWF-iCre/+ and H2-Aa^{flox/flox}; +/+ mice (expanded). Representative digital photomicrographs of unmerged and merged images from Figure 7 are shown. Scale bars: A-P = 50 μm, Q-X =100 μm, Y- FF = 50 μm, GG-PP = 100 μm.

Supplementary Table 1. PCR assay protocol. This table depicts the PCR assay conditions used to detect flpo recombinase, SJL H2-Aa loxP sequences and vWF-iCre recombinase sequences in experimental mice.

Supplementary Table 2. Immunohistochemistry antibodies and lectins. This table provides detailed information on the antibodies and lectins used to detect human and mouse tissue MHC class II, endothelial cells and leukocytes.

Abbreviations

AIDP:	acute inflammatory demyelinating polyradiculoneuropathy
ANOVA:	analysis of variance
BNB:	blood-nerve barrier
bp:	base pairs
BPNM:	bovine peripheral nerve myelin
C57BL/6:	C57 Black 6
CCD:	charged-coupled device
CD:	Cluster of differentiation
CFA:	Complete Freund Adjuvant
CMAP:	compound motor action potential
DAPI:	4′,6-diamidino-2-phenylindole
DCT:	dorsal caudal tail
DNA:	deoxyribonucleic acid
dNTP:	deoxyribonucleotide triphosphate
D-PBS:	Dulbecco's phosphate buffered saline
EDTA:	Ethylenediaminetetraacetic acid
ES:	embryonic stem
flpo:	flippase o
FITC:	fluorescein isothiocyanate
FRT:	flippase recombinase target
GBS:	Guillain-Barré syndrome
GTA:	glutaraldehyde
H2-Aa:	mouse Major Histocompatibility Complex class II antigen A-alpha chain
HLA:	human leukocyte antigen
IL:	interleukin

loxP: "locus of crossing over in P1"

MHC: Major Histocompatibility Complex

MMRRC: Mutant Mouse Resource & Research Center

NGS: normal goat serum

NMSS: Neuromuscular Severity Score Scale

OCT: Optimum Cutting Temperature$^{®}$

PBS: phosphate buffered saline

PFA: paraformaldehyde

PCR: polymerase chain reaction

SJL: Swiss Jim Lambert

Sm-EAN: severe murine experimental autoimmune neuritis

SNP: single nucleotide polymorphism

RRID: Research Resource Identifier

RT: room temperature

TAE: Tris base, Acetic acid, Ethylenediaminetetraacetic acid

tdT: tdTomato

Th: T-helper

TL: Tomato lectin

UAB: University of Alabama at Birmingham

UEA-1:   *Ulex Europaeus Agglutinin-1*

vWF: von Willebrand factor

vWF-iCre: inducible von Willebrand factor Cre recombinase transgene

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A

H2-Aa^flox/flox; vWF-iCre/+
H2-Aa^flox/flox; +/+
H2-Aa^+/+; vWF-iCre/+
Female, 8-12 weeks old

Body weight and NMSS

Pertussis Toxin 200 ng in 100 μL 1X PBS

Pertussis Toxin 200 ng in 100 μL 1X PBS

Anesthesia: 100 mg/kg Ketamine + 10 mg/kg Xylazine I.P.

Motor Nerve Conduction Studies (bilateral sciatic and DCTN)

Tissue Harvest (bilateral sciatic nerves, bilateral lymph nodes (PO, IN, IL), spleen and tail

rmIL-12 100 ng in 100 μL 1X PBS

Anesthesia: 100 mg/kg Ketamine + 10 mg/kg Xylazine I.P.

BPNM 2.5 mg in 200 μL 1:1 CFA in 1X PBS S.C. (Tail base, flanks both sides & mid-back)

Body weight

-27 -26 -25 -24 -23 -2 -1 0 1 2 3 28

Tamoxifen 100 mg/kg in Corn Oil I.P. Or Corn Oil only

3 weeks

Disease Induction

Days post-induction

B

p <0.00001

NMSS

Days post-induction

H2-Aa^flox/flox; +/+ + Tamoxifen

H2-Aa^flox/flox; vWF-iCre/+ + Tamoxifen

H2-Aa^+/+; vWF-iCre/+ + Tamoxifen

H2-Aa^flox/flox; vWF-iCre/+ + Corn Oil

C

Body weight (g)

Days post-induction

D

% Change in Body weight (g)

H2-Aa^flox/flox; vWF-iCre/+

p

A

H2-Aa^flox/flox; vWF-iCre/+

p

B

H2-Aa^flox/flox; +/+

C

H2-Aa^flox/flox; +/+

D

H2-Aa^flox/flox; +/+

E

H2-Aa^flox/flox; vWF-iCre/+

F

H2-Aa^flox/flox; +/+

H

H2-Aa^flox/flox; +/+

I

H2-Aa^flox/flox; vWF-iCre/+

G

H2-Aa^flox/flox; vWF-iCre/+

L

H2-Aa^flox/flox; vWF-Cre/+

M

H2-Aa^flox/flox; vWF-iCre/+

J

H2-Aa^flox/flox; +/+

K