The Jag2/Notch1 signaling axis promotes sebaceous gland differentiation and controls progenitor proliferation

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Abstract

The sebaceous gland (SG) is a vital appendage of the epidermis, and its normal

homeostasis and function is crucial for effective maintenance of the skin barrier. Notch

signaling is a well-known regulator of epidermal differentiation, and has also been

shown to be involved in postnatal maintenance of SGs. However, the precise role of

Notch signaling in regulating SG differentiation in the adult homeostatic skin remains

unclear. While there is evidence to suggest that Notch1 is the primary Notch receptor

involved in regulating the differentiation process, the ligand remains unknown. Using

monoclonal therapeutic antibodies designed to specifically inhibit of each of the Notch

ligands or receptors, we have identified the Jag2/Notch1 signaling axis as the primary

regulator of sebocyte differentiation in homeostatic skin. Mature sebocytes are lost upon

specific inhibition of the Jag2 ligand or Notch1 receptor, resulting in the accumulation of

proliferative stem/progenitor cells in the SG. Strikingly, this phenotype is reversible, as

these stem/progenitor cells re-enter differentiation when the inhibition of Notch activity is

lifted. Thus, Notch activity promotes correct sebocyte differentiation, and is required to

restrict progenitor proliferation.

Introduction

The skin is a vital organ that acts as a protective barrier against the external

environment, and safeguards against fluid loss. An important component of this barrier

function is the presence of a complex mixture of oils, known as sebum, which is

produced by the sebaceous glands (SGs). SGs are part of the epidermis and are

typically associated with the hair follicle. These acinar structures have two cell types:

basal stem or progenitor cells which encase the differentiated sebocytes (Figure 1a).

Sebocyte differentiation begins at the proximal tip of the of the SG, with maturing

sebocytes moving upwards, enlarging, accumulating lipids, and ultimately undergoing a

highly regulated and specialized form of cell death in which they release their lipid

contents into the sebaceous duct (Figure 1b) (Kretzschmar et al., 2014; Schneider and

Paus, 2010). This process requires the constant turnover of sebocytes, which occurs

over a period of 7-14 days in mice (Jung et al., 2015). Both over- and underproduction

of sebum have been linked to various skin disorders including acne or dry skin (Al-Zaid

et al., 2011; Binczek et al., 2007; Karnik et al., 2009; Lovászi et al., 2017; Rittié et al.,

2016; Seiffert et al., 2007; Shi et al., 2015; Smith and Thiboutot, 2008; Stenn et al.,

1999), and rare sebaceous carcinomas constitute aggressive tumors leading to high

mortality (Buitrago and Joseph, 2008; Nelson et al., 1995), thus SG number and

function have to be tightly regulated for proper skin function.

The Notch signaling pathway is one of the most studied regulators of cell fate decisions,

and is known to be widely involved in epidermal differentiation. The pathway consists of

multiple ligands and receptors that typically form a signaling axis in pairs. Notch

signaling can regulate cell fate by either inducing or inhibiting differentiation, or by

making binary cell fate decisions (Wilson and Radtke, 2006). Classically, these

functions of Notch signaling have been studied during development, but increasing

evidence suggests that the Notch pathway is also involved in regulating cell fate and

cell states in adult homeostatic tissues (Ables et al., 2011; Lafkas et al., 2015; Mosteiro

et al., 2023; Sato et al., 2012; Siebel and Lendahl, 2017).

While it is known that Notch signaling is not required for embryonic development of the

epidermis, it is essential for the postnatal maintenance of the hair follicles and the SGs

(Watt et al., 2008). However, the precise role of Notch signaling in adult sebocyte

differentiation has not been comprehensively investigated, with most studies examining

irreversible deletions of the Notch pathway components in the embryonic ectodermal

lineages. While these studies report SG defects, it remains unclear whether these

defects are due to a direct effect on the SGs, or whether they are a consequence of

general skin defects also observed in these models. For example, SGs are absent in

mice with embryonic pan-Notch deletions such as *RBPJ* (Blanpain et al., 2006),

gamma-secretase, *Notch1Notch2*, and *Notch1Notch2Notch3*, and are severely reduced

in *Notch1* and *Notch1Notch3* embryonically-deleted skin (Pan et al., 2004), while

deletion of *Notch2* alone does not affect the SG (Pan et al., 2004). Consistent with the

constitutive deletions, loss of *RBPJ* in adult SGs also results in missing sebocytes, while

loss of *Notch1* in the adult SGs results in miniaturized lobes that still contain some

differentiated sebocytes (Veniaminova et al., 2019). Interestingly, activation of *Notch1* in

the adult skin results in enlarged SGs (Estrach et al., 2006). Conversely, for the Notch

pathway ligands, embryonic and adult deletion of *Jag1* (Estrach et al., 2006), and

embryonic deletion of *Dll1*(Estrach et al., 2008) results in normal SG morphology.

Collectively, these data suggest that Notch1 is the dominant Notch receptor involved in

regulating sebocyte differentiation, however, it remains unclear which ligand is required.

In our previous work, we observed that systemic inhibition of Jag2 using monoclonal

therapeutic antibodies resulted in SG defects in adult mice (Lafkas et al., 2015). Given

that our therapeutic antibodies selectively, potently, and transiently inhibit each of the

distinct Notch receptors and ligands (Tran et al., 2013; Wu et al., 2010; Yu et al., 2020),

they constitute ideal tools to dissect the contribution of each of these pathway members

to sebocyte differentiation in adult homeostatic skin. Leveraging the use of these

antibodies, we demonstrate that specific inhibition of the Jag2 ligand or Notch1 receptor

both result in the loss of mature sebocytes in the SG, establishing the Jag2/Notch1

signaling axis as a crucial regulator of sebocyte differentiation in adult homeostatic skin.

The loss of mature sebocytes in the SG is concomitant with an accumulation of cells

with a basal phenotype, forming epithelial remnants in the SG. Cells in these epithelial

remnants are actively proliferating and express stem/progenitor markers indicating that

sebocyte differentiation is halted, while stem/progenitor numbers are increased.

Importantly, this phenotype is reversible, as these epithelial cells re-enter differentiation

with the return of Notch activity. Thus, Notch activity is required in sebocyte

stem/progenitor cells for their proper differentiation, and its inhibition locks these cells in

a reversible progenitor state.

Results

Jag2 is the dominant Notch signaling ligand involved in regulating sebocyte

differentiation

To investigate the role of Notch signaling in the homeostatic skin, we treated 8-week old

mice with a single dose of the various antagonizing antibodies (anti-Notch1, anti-

Notch2, anti-Jag1, anti-Jag2 and the isotype control antibody anti-Ragweed) alone or in

combination. We then examined the dorsal, resting phase (telogen) skin at 3, 7 and 14

days post treatment. We first confirmed that our antibodies could reproduce the

requirement of Notch1 in regulating sebocyte differentiation. To this end, we treated

mice with Notch1 (aN1) and Notch2 (aN2) blocking antibodies and examined the SGs at

7 days post treatment. Loss of mature sebocytes was observed specifically after aN1

treatment, while the aN2 treated SGs showed normal morphology (Figure 1c,d).

However, the combined treatment of aN1N2 had a more pronounced effect on SG

morphology as compared to aN1 alone (Figure 1c,d), indicating that Notch2 also

contributes to regulating sebocyte differentiation, possibly as a compensatory

mechanism after inhibition of the dominant Notch1 receptor.

Next, we investigated which ligand formed the signaling pair with Notch1. Loss of

mature sebocytes was observed specifically after treatment with the Jag2 blocking

antibody (aJ2), but not after treatment with the Jag1 blocking antibody (aJ1) at 7 days

post treatment (Figure 1e,f). For aJ2 treatment, the loss of sebocytes began at 3 days

post treatment, but affected only a small proportion of the SGs at this timepoint (Figure

1g). However, by 7 days post treatment, most SGs had either completely lost all

sebocytes, or had only some sebocytes remaining (Figure 1g). The loss-of-sebocyte

phenotype was most pronounced with a combined treatment of Jag1/Jag2 blocking

antibodies (aJ1J2) (Figure 1g), suggesting that while Jag2 is the primary Notch ligand

involved in regulating sebocyte differentiation, Jag1 also plays a minor role in this

process, but is unable to produce a phenotype on its own. In conclusion, these data

indicate that the Jag2-Notch1 signaling axis is the dominant Notch ligand-receptor pair

required for sebocyte differentiation in the adult skin.

We also examined the percentage of SGs consisting of bursting sebocytes releasing

sebum as a proxy of a functional sebaceous duct. There were no significant differences

between treatments (Figure S1a,b), hinting at a functionally intact sebaceous duct.

Notch is active in the sebaceous gland stem cells

We next characterized the expression of the relevant receptor and ligand in the SG to

develop a spatial map of Notch activity in this tissue. Both the Notch receptors and their

ligands are transmembrane proteins that interact with each other on neighboring cells to

activate the pathway. To examine this interaction, we performed a triple stain for the

cleaved (active) form of the Notch1 intracellular domain (ICD), and Notch1 and Jag2 in

situ hybridization (ISH) probes at 3 days post antibody treatment. In the control treated

mice, Notch1 ICD was observed in the basal stem cell compartment of the SG, but not

in the differentiating sebocytes (Figure 2a-c, cell types based on morphology). We saw

a similar pattern of N1ICD-postive cells for aJ1 treatment (Figure 2d-f). Notch1 signaling

was not active in all basal cells, as only ~50% of them were positive for N1ICD after

control and aJ1 treatment (Figure 2g). Consistent with previous studies, the majority of

these N1ICD+ cells were present near the proximal tip of the SG (Figure S2a-c)

(Veniaminova et al., 2019), where the initial sebocyte differentiation has been proposed

to occur (Kretzschmar et al., 2014). However, after aJ2 treatment, Notch1 activity (ICD

staining) was absent, or observed only at very low levels in the basal stem cells, while

they still expressed Notch1 and Jag2 mRNA (Figure 2h-j). Strikingly, we noticed the

expression of both Notch1 ISH and Jag2 ISH in the same cell on most N1ICD+ cells

(Figure 2k). Interestingly, a majority of all basal cells (including N1ICD- cells), expressed

both N1 and Jag2 mRNA (Figure S2d). Our data shows that the vast majority of SG

basal stem cells express both the ligand and receptor, but only some basal stem cells

experience active Notch signaling at any one point in time, as evidenced by the

presence of N1ICD. This could be a technical limitation as the triple staining only

captures a temporal snapshot of the basal stem cells, with the N1+J2 mRNA positive

cells going on to express N1ICD later, or it could hint towards a more complex

regulatory mechanism involved in activating Notch signaling.

Notch activity, as well as Notch1 and Jag2 mRNA were also observed in the

interfollicular epidermis (IFE) and other cells of the hair follicle (Figure S2e,f). While

there is a reduction in Notch-active cells in these other regions, it does not appear to

significantly impact the rest of the skin. There were no significant differences in the

width of the IFE or the adipocyte layer between treatments (Figure S2g,h). This together

with the histological appearance (FigureS2i,j) of these regions suggests that

proliferation and differentiation in these compartments remains unaffected.

Loss of Notch activity in the SG stem cells inhibits sebocyte differentiation

To further detail the effect of Notch inhibition on sebocyte differentiation, we examined

the expression of mature sebocyte markers. Adipophilin (Adipo) is expressed in all

mature sebocytes (Frances and Niemann, 2012; Ostler et al., 2010) and Fatty acid

synthase (FASN) is expressed in mid- and late-differentiating sebocytes, with FASN

levels decreasing in the most mature sebocytes (Cottle et al., 2013) (Figure 1b). Since

N1ICD staining disappears at 3 days post antibody treatment, we examined the mature

sebocyte markers at this timepoint. While N1ICD staining was specifically lost in the SG

basal stem cells of aJ2 treated skin, mature sebocytes expressing FASN were still

observed at this timepoint (Figure 2j, Figure 3a,b and Figure S3a). All cells that express

FASN also express adipophilin, but since FASN levels decrease with sebocyte maturity,

we also examined and focused on adipophilin to mark all sebocytes (Figure 3c,d and

Figure S3b-e). The number of cells that expressed adipophillin were not significantly

different between treatments at 3 days post antibody treatment (Figure 3h). At 7 days

post antibody treatment, control and aJ1 treated skin showed normal SG morphology

and sebocyte marker expression (Figure 3e and Figure S3f,h,i), but both aJ2 and aJ1J2

SGs had lost sebocyte marker expression, and the SG was filled with cells with a basal

phenotype (basal-like cells) (Figure 3f and Figure S3g,j,k). Consistently, the number of

cells expressing adipophilin were significantly lower for aJ2 and aJ1J2 treatment (Figure

3i). Interestingly, we noticed that some of these affected SGs still contained a few

mature sebocytes (Figure 3f and Figure S3g), which were found at the distal end near

the sebaceous duct. The location of these remaining sebocytes suggests that existing

mature sebocytes are not affected by the Notch blockade, and go through their normal

differentiation process, eventually bursting and releasing the sebum (Figure 3g). Thus,

we propose that Notch blockade inhibits differentiation at basal stem cell-level or in a

sebocyte progenitor.

Notch activity in the SG stem cells is required to prevent unregulated progenitor proliferation

To determine whether the epithelial cells that filled the affected SGs at 7 days post treatment were stem/progenitor cells, we examined them for stem and early differentiation markers. Lrig1 positive cells form a distinct stem cell compartment that maintains the SG and the upper part of the hair follicle (Frances and Niemann, 2012; Niemann and Horsley, 2012; Page et al., 2013), allowing us to use Lrig1 as a marker for the basal stem cells of the SG, while Androgen Receptor (AR) can be used as an early marker of sebocyte differentiation (Cottle et al., 2013) (Figure 4a,b and Figure S4a,b). We noticed that the AR-expressing cell population could be divided into two groups: a basal stem cell population that co-expressed Lrig1, but did not express FASN (arrow heads in Figure 4a,c), and an early differentiating sebocyte population that expressed FASN, but did not express Lrig1 (arrows in Figure 4a,c). We hypothesize that the Lrig1+/AR+ population is a progenitor cell population, in addition to the Lrig1+ stem cells, similar to the recently identified transitional basal cell population in the SG (Veniaminova et al., 2023). There were no significant differences in the number of Lrig1 positive stem cells per SG, or the AR-expressing progenitor population between treatments at 3 days post treatment (Figure 4d,e). By 7 days post treatment, however, the basal-like cells that filled the SG were all positive for Lrig1 (Figure 4f,g and Figure S4e), with the total number of Lrig1 positive cells per SG increasing significantly for aJ2 and aJ1J2 treated SGs (Figure 4h), while SGs after aJ1 treatment showed normal morphology and marker expression (Figure S4c,d). The proportion of AR-expressing cells was not significantly different between treatments (Figure 4i). These results

indicate that the basal-like cells that fill the SG after blocking Notch signaling by aJ2 and

aJ1J2 treatment, are stem/progenitor cells. Additionally, we examined the SGs for their

proliferative capacity to confirm stem/progenitor function. In a normal SG, proliferation is

restricted to the basal stem cells (Figure 4j). As expected, proliferation was also

restricted to the basal stem cells in aJ1 treated SGs (Figure S4f,g). Remarkably, most of

the basal-like cells in the aJ2 treated SGs were proliferative, while the rare mature

sebocytes remaining in the SG were non-cycling (Figure 4k). As the SGs are mostly

filled with basal-like cells at this time (Figure 4h), the total number of proliferating cells

per SG was significantly higher (Figure 4l).

Overall, these data suggest that inhibition of Notch activity by aJ2 treatment retains the

stem and progenitor (Lrig1+ and Lrig1+/AR+, respectively) cells in their immature

proliferative state and prevents differentiation.

The block in sebocyte differentiation is lifted upon recovery of Notch activity

The therapeutic antibodies employed do not inhibit Notch signaling permanently, as the

antibodies eventually become cleared from the animal's system. To determine whether

the loss of sebocyte phenotype was reversible, we examined the SGs 14 days post

single-dose treatment. Intriguingly, mature sebocytes begin to recover at this time point

(Figure 5a,b, compare with Figure 1f,g). We hypothesized that the sebocyte recovery

must be due to the return of Notch activity after antibody washout. To test this, we

examined the SGs for Notch activity at 7 days post treatment, since the return of Notch

activity must precede the recovery of mature sebocytes. Fittingly, we observed N1ICD

expression return in some of the basal-like cells at this time (Figure 5c,d and Figure

S5a-d). The percent of N1ICD positive cells per SG strongly increased from 1% at 3

days post treatment to 29% at 7 days post treatment (Figure 5e), even though the

percentage of N1ICD positive cells per SG remained significantly lower than control for

aJ2 and aJ1J2 treated SGs at this time (Figure S5d). Next, we examined the SGs at 14

days post treatment for mature sebocyte markers to confirm the sebocyte recovery.

Indeed, we saw the return of cells expressing adipophilin in the aJ2 and aJ1J2 treated

SGs (Figure 5f,g and Figure S5e-h). There was an overall increase in the number of

these cells from day 7 to day 14 (Figure 5h), even though the number of these cells

remained significantly lower in these SGs compared to controls (Figure S5h).

Interestingly, the majority of the adipophilin expressing cells were found in the proximal

third of the SG (51% for aJ2 treatment and 66% for aJ1J2 treatment), consistent with

the initiation of sebocyte differentiation at the proximal tip. However, there was a

significant proportion of these cells found in the middle third (22% and 25%

respectively), and distal third (27% and 9% respectively) of the SG. This could be due to

the newly differentiated cells moving through the SG in a proximal to distal direction, as

is the case during normal homeostasis. Alternatively, the stem cells could also be

differentiating at sites other than just the proximal tip, as previously demonstrated by

multi-color lineage tracing (Andersen et al., 2019). We further examined the SGs at 14

days post treatment for their AR expression, and confirmed that it had also been

restored to its normal pattern (Figure 5i,j and Figure S5i-l). We also found that the

average number of AR-expressing cells decreased from day 7 to day 14 post aJ2 and

aJ1J2 treatment (10 to 2.95, and 8.56 to 5.55, respectively) (Figure 5k), returning to a

more homeostatic state. Together, these data indicate that Notch inhibition does not

result in a permanent cell fate switch, but maintains the stem/progenitor state, allowing

the recovery of the differentiation process with the restoration of Notch activity.

Discussion

Based on our findings, we propose that the Jag2/Notch1 signaling axis is essential for

correct sebocyte differentiation in homeostatic dorsal skin, and that inhibition of this

signaling retains the basal stem and progenitor cells in a proliferative state, and blocks

further differentiation. Thus, Notch signaling is required to prevent unregulated

stem/progenitor proliferation, and induction of the sebocyte differentiation program.

Moreover, Notch inhibition resulting in complete loss of mature sebocyte differentiation

is a reversible phenotype, indicating that there remains a functional progenitor pool

present during the studied timeframe.

Here, we have leveraged the use of monoclonal therapeutic antibodies designed to

inhibit each of the distinct Notch receptors or ligands to study the role of Notch signaling

in adult homeostatic tissue. We have shown that Jag2 is the hitherto unknown ligand

involved in regulating sebocyte differentiation. Inhibition of Notch signaling using Jag2

blocking antibodies results in the loss of mature sebocytes, with the resulting SG being

filled with basal-like cells forming "finger-like" epithelial remnants. A similar phenotype

has been described by a previous study (Veniaminova et al., 2019) that used Lrig1-

CreERT2 to irreversibly knock out RBPJ in adult homeostatic skin. This strategy

enabled inhibition of Notch signaling specifically in the Lrig1+ stem cell population that

normally maintains the SGs, but preserved it in the rest of the hair follicle. Interestingly,

the authors saw two contradictory phenotypes as a result: overall loss of SG lobes,

replaced by the finger-like epithelial remnants, as well as the presence of persistent

SGs that were enlarged. The authors showed that over time, patches of Rbpj mutant

cells extended out of their niche into the interfollicular epidermis (IFE), where Lrig1 is

not expressed, and that loss of RBPJ in the IFE led to enlarged SGs. They argue that

while Notch signaling promotes sebocyte differentiation in the SG stem cells, it indirectly

suppresses these glands from the IFE. Our results did not show the enlarged SG

phenotype, and we only observed the finger-like epithelial remnants. While injections of

the Notch blocking antibodies are systemic, we only observed a reduction in the number

of Notch-active cells in the IFE, but not a complete loss. This could explain why we

didn't observe the enlarged SG phenotype. Additionally, we observed the phenotype as

early as 3 days post antibody treatment, while Veniaminova et al., observed the SGs 10

weeks after tamoxifen injection. These differences are likely due the different

methodologies used in the two studies.

Several studies indicate that Notch signaling is essential for the postnatal maintenance

of SGs (Blanpain et al., 2006; Estrach et al., 2008, 2006; Pan et al., 2004; Watt et al.,

2008), but so far only Veniaminova et al., have specifically examined SGs in the adult

homeostatic skin. They observed that the stem/progenitor and differentiation markers

were intermingled in the finger-like remnants forming an unnatural hybrid state, neither

staying in a true progenitor state nor differentiating. In contrast, we observed a complete

block in differentiation, with the stem/progenitor cells being locked in an immature

proliferative state. These observations suggest that antagonistic antibodies may be able

to achieve a more complete inhibition of Notch signaling in the SG stem/progenitor

compartment.

Importantly, we were able to show that the loss-of-sebocyte phenotype in the SG is

reversible. Having used therapeutic antibodies to block Notch signaling, the inhibition of

the signaling pathway was not permanent. As Notch activity returned to the SG after

antibody washout, sebocyte differentiation also recovered. These data indicate that the

loss of Notch signaling does not impact the stem/progenitor potential of the SG, but

prevents further differentiation. Indeed, a functional progenitor pool accumulates in the

SG, primed for differentiation, as soon as Notch signaling becomes active. A recent

study by Veniaminova et al., has shown that Lrig1-CreERT2 used to irreversibly knock

out *Pparg* in adult homeostatic skin ablates 99% of the SGs (Veniaminova et al., 2023).

Interestingly, they showed that non-recombined cells from other parts of the hair follicle

migrate to the SG zone and regenerate the genetically ablated SGs. This regeneration

process is dependent on the hair growth cycle, with the SGs primarily regenerating

during anagen (active growth) phase and not in the telogen phase. While our studies

cannot rule out the contribution of non-SG cells to the SG recovery seen upon return of

Notch activity, this recovery is not dependent on the hair growth cycle. Sebocytes are

able to differentiate while the hair follicle is still in the telogen phase, indicating a lift of

the differentiation block on the stem/progenitor cells. This reversibility of phenotype is

intriguing from a therapeutic perspective, as it suggests a translational potential in skin

disorders involving sebocyte overactivity, such as acne.

An important open question is how Notch signaling regulates sebocyte differentiation.

FASN, which can be used as a readout for sebocyte differentiation, is a downstream

target of AR (Schirra et al., 2005). We observed an Lrig1+/AR+/FASN- population in the

normal SGs, similar to the basal-like cells that fill the finger-like remnants seen after

Notch inhibition. This expression pattern indicates that AR requires a co-activator to

activate downstream gene expression in the SG. Previous studies have reported that

Notch effectors such as HEY1, HEY2 and HEYL can act as co-repressors of AR in

prostate cells (Belandia et al., 2005; Kamińska et al., 2020; Lavery et al., 2011). It is

possible that certain Notch effectors can act as either co-activators or co-repressors of

AR in a context-dependent manner. Further investigation will be needed to understand

the exact molecular role Notch signaling plays in regulating sebocyte differentiation.

Methods

Animal strains and treatments

All animal experimentation was performed according to protocols approved by the

Genentech Institutional Animal Care and Use Program (IACUC) committee. Female

C57BL/6 mice were obtained from Charles River-Hollister, and were used for all

experiments. The mice were 8 weeks old upon treatment. This time point was chosen to

correspond to the resting (telogen) phase of the hair growth cycle, as SG size can vary

by hair cycle stage. All mice were injected intraperitonially with a single dose of blocking

antibodies diluted in sterile saline at the following concentrations: anti-Jag1 at 20mg/kg,

anti-Jag2 at 20mg/kg, anti-Jag1+anti-Jag2 at 20mg/kg+20mg/kg = 40mg/kg, anti-Notch1

at 5mg/kg, anti-Notch2 at 10mg/kg and anti-Notch1+anti-Notch2 at 5mg/kg+10mg/kg =

15mg/kg. Anti-Ragweed isotype control antibody was injected at concentrations to

match the maximum dose of treatment antibodies.

Histopathological analysis and immunochemistry

Telogen mouse dorsal skin was collected at 3, 7 and 14 days post antibody injection.

For frozen sections, skin samples were fixed in 4% paraformaldehyde in PBS, for 40

minutes at 4°C, washed, and then immersed in 30% sucrose in PBS overnight at 4°C.

The tissue was then embedded in OCT (TissueTek), frozen immediately on dry ice, and

stored at -80°C. Additional skin tissue from the same animals was also fixed with 10%

neutral buffered formalin and then used to create paraffin-embedded sections.

Hematoxylin and eosin (H&E) staining was performed by the Pathology core at

Genentech.

The triple immunofluorescence stain for Notch1 ICD (IHC), and Notch1 mRNA (ISH)

and Jag2 mRNA (ISH) was performed by the histopathology development group at

Genentech. ACD LS 2.5 probes were ordered from Advanced Cell Diagnostics.

RNAScope LS 2.5 Murine-Jag2_C1 (417518) nucleotides spanning from nt 552-1480 of

reference sequence NM_010588.2, and Murine-Notch1_C2 (404648-C2) nucleotides

spanning from nt 1153-1960 of reference sequence NM_008714.3. For positive control

RNAScope LS 2.0 Murine-PPIB probe (313917) nucleotides spanning from nt 98~856 of

reference sequence NM_011149.2 were used. For negative control RNAScope LS 2.0

DapB probe (312038) nucleotides spanning from nt 414~862 reference sequence

EF191515 were used. For Immunohistochemistry, we used N1ICD (Cell Signaling,

4147), at 20 ug/ml working concentration.

The triple immunofluorescence for murine Jag2_Notch1 (dual ISH) with anti_Notch1

ICD (IHC) 3 Plex ISH_ISH_IHC in murine tissues using formalin-fixed, paraffin-

embedded sections was performed on the Leica Bond-RX complete automation system

using the RNAscope$^®$ LS Multiplex Reagent Kit (322800). Slides were baked and

dewaxed on Leica Bond-RX and pretreated with Bond Epitope Retrieval Solution 2

(ER2) (AR9640) from Leica at 100°C for 40 minutes. After pretreatment, the probes

were cocktailed, and hybridization was performed at 42°C for 120 minutes followed by

amplification steps and developed with Opal 570 fluor at 1:1000 and Opal 690 fluor at

1:1500 from Akoya using the Opal Polaris 7 Auto Detection Kit (NEL811001KT). The

immunohistochemistry was performed upon completion of ISH. The primary antibody

incubation was 60 minutes at room temperature, followed by secondary antibody

incubation for 30 min at room temperature with HRP conjugated Goat anti Rabbit

(Perkin Elmer, NEF812001EA). The slides were then developed with Opal 780 fluor at

1:25 (Akoya, SKU FP1501001KT) following the manufacturer's instructions. Slides were

imaged using Olympus VS200.

All other immunohistochemistry was performed using the following antibodies: N1ICD at

1:500 (Cell Signaling, 4147), FASN at 1:100 (BD, 610963), Adipophillin at 1:500

(Fitzgerald, 20R-AP002), Ki67 at 1:100 (Thermo Fisher Scientific, SP6 RM-9106-SO),

Lrig1 at 1:200 (R&D Systems AF3688-SP), and AR at 1:250 (Thermo Fisher Scientific,

MA1-150 AN1-15). Slides were imaged using the Leica Thunder microscope.

Imaging parameters were identical for all images. Images were processed using Fiji and

Adobe Illustrator.

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Author contributions

S.N.F.A. designed the project, performed experiments and data analysis, and wrote the

manuscript. S.C. developed the triple stain methodology, and performed the relevant

staining. K.S. helped with some experimental design. The first observation of the

phenotype came out of D.F.'s work. L.V. analyzed the data and contributed to writing

the manuscript. F.P. provided histopathological analysis and discussion. C.W.S.

directed and supervised the research, and analyzed the data. All authors approve the

content of the manuscript.

Conflict of interest

All authors are or where employees of Genentech Inc. and/or hold shares in Roche.

C.W.S is currently employed at Gilead Sciences.

Figure Legends

Figure 1. Jag2 is the dominant ligand involved in regulating sebocyte

differentiation.

(a) A representative image of the homeostatic hair follicle, including its associated

sebaceous gland (SG). (b) A detailed schematic of the SG showing the outer basal

stem cell layer encasing the differentiated sebocytes. The schematic also shows the

gene expression in different regions of the SG. (c) Representative H&E images of SGs

from mice (n = 5 each) treated with aRW, aN1, aN2 and aN1N2, 7 days post treatment.

(d) Quantification of type of SG found after each treatment. The SGs were divided into

three categories: normal SGs containing characteristic number of sebocytes (normal

SG), SGs containing a mix of sebocytes and basal-like cells (mixed SG), and SGs

containing no sebocytes and only basal-like cells (no sebocyte SG). For (c), (e) and (f),

each SG panel is labeled with where the SG is normal, mixed or no sebocyte SG. p-

values: aN1 = 2.02E-123, aN2 = 0.426, aN1N2 = 3.85E-114. Total n of SGs quantified

per treatment: aRW = 425, aN1 = 298, aN2 = 343, aN1N2 = 217. (e) Representative

H&E images of SGs from mice (n = 5 each) treated with aRW, aJ1 and aJ2, 3 days post

treatment. (f) Representative H&E images of SGs from mice (n = 5 each) treated with

aRW, aJ1, aJ2 and aJ1J2, 7 days post treatment. (g) Quantification of type of SG found

after each treatment. 3 days: p-values: aJ1 = 0.409, aJ2 = 0.004. 7 days: p-values: aJ1

= 0.057, aJ2 = 7.61E-151, aJ1J2 = 6.23E-169. Total n of SGs quantified per treatment:

3 days, aRW = 851, aJ1 = 944, aJ2 = 760, 7 days, aRW = 491, aJ1 = 499, aJ2 = 388,

aJ1J2 = 461. Chi-sqaure test used for statistical analysis. All treatments compared

against aRW. Error bars represent SEM. Scale bars are 100 μm.

Figure 2. Notch is active in the sebaceous gland stem cells.

(a-c) Representative triple stain images for N1ICD, Notch1 and Jag2 mRNA in SGs

from mice (n = 5 each) treated with aRW, 3 days post treatment. (a) Four channels

showing N1ICD, N1 ISH, J2 ISH and DAPI. (b) Two channels showing N1 ISH and J2

ISH. (c) One channel showing N1ICD. (d-f) Representative triple stain images for

N1ICD, Notch1 and Jag2 mRNA in SGs from mice (n = 5 each) treated with aJ1, 3 days

post treatment. (d) Four channels showing N1ICD, N1 ISH, J2 ISH and DAPI. (e) Two

channels showing N1 ISH and J2 ISH. (f) One channel showing N1ICD. (g)

Quantification of the percentage of N1ICD positive (N1ICD+) basal stem cells in SGs

from mice (n = 5 each) treated with aRW, aJ1 and aJ2, 3 days post treatment.

Percentage was calculated by dividing the number N1ICD+ basal stem cells by total

number of basal stem cells in each SG. (h-j) Representative triple stain images for

N1ICD, Notch1 and Jag2 mRNA in SGs from mice (n = 5 each) treated with aJ2, 3 days

post treatment. (h) Four channels showing N1ICD, N1 ISH, J2 ISH and DAPI. (i) Two

channels showing N1 ISH and J2 ISH. (j) One channel showing N1ICD. (k)

Quantification of what percentage of the N1ICD+ basal stem cells express both N1 ISH

and J2 ISH, only N1 ISH or only J2 ISH. (g and k) Total n of SGs quantified per

treatment: aRW = 13, aJ1 = 15, aJ2 = 15. Error bars represent SEM. Scale bars are 25

μm.

Figure 3. Loss of Notch activity in the SG stem cells inhibits sebocyte differentiation.

(a,b) Representative co-stain images for N1ICD and FASN in SGs from mice (n = 5 each) treated with aRW (a) and aJ2 (b), 3 days post treatment. (c,d) Representative adipophillin staining in SGs from mice (n = 5 each) treated with aRW (c) and aJ2 (d), 3 days post treatment. (e,f) Representative adipophillin staining in SGs from mice (n = 5 each) treated with aRW (e) and aJ2 (f), 7 days post treatment. (g) A representative H&E image of an SG from mice (n = 5 each) treated with aJ2, 7 days post treatment. Arrow points to a bursting sebocyte releasing sebum into the sebaceous duct. (h) Quantification of the number of cells expressing adipophilin in each SG, 3 days post treatment with aRW, aJ1 and aJ2. p-values: aJ1 = 0.749, aJ2 = 0.062. Total n of SGs quantified per treatment: aRW = 17, aJ1 = 14, aJ2 = 30. (i) Quantification of the number of cells expressing adipophilin in each SG, 7 days post treatment with aRW, aJ1, aJ2 and aJ1J2. p-values: aJ1 = 0.301, aJ2 = 4.13E-14, aJ1J2 = 4.06E-14. Total n of SGs quantified per treatment: aRW = 18, aJ1 = 19, aJ2 = 22, aJ1J2 = 21. Student's T-test used for statistical analysis. All treatments compared against aRW. Error bars represent SEM. Scale bars are 25 µm.

Figure 4. Notch activity in the SG stem cells is required to prevent unregulated progenitor proliferation.

(a,b) Representative co-stain images for Lrig1 and AR in SGs from mice (n = 5 each) treated with aRW (a) and aJ2 (b), 3 days post treatment. (c) A representative co-stain

image for FASN and AR in an SG from mice (n = 5 each) treated with aRW, 3 days post

treatment. Arrows point to sebocytes, and arrowheads point to progenitor cells. (d)

Quantification of the number of cells expressing Lrig1 in each SG, 3 days post treatment

with aRW, aJ1 and aJ2. p-values: aJ1 = 0.152, aJ2 = 0.450. (e) Quantification of what

percentage of the Lrig1+ cells express AR, 3 days post treatment with aRW, aJ1 and

aJ2. p-values: aJ1 = 0.789, aJ2 = 0.028. (d and e) Total n of SGs quantified per

treatment: aRW = 17, aJ1 = 10, aJ2 = 24. (f,g) Representative co-stain images for Lrig1

and AR in SGs from mice (n = 5 each) treated with aRW (f) and aJ2 (g), 7 days post

treatment. (h) Quantification of the number of cells expressing Lrig1 in each SG, 7 days

after treatment with aRW, aJ1, aJ2 and aJ1J2. p-values: aJ1 = 0.628, aJ2 = 9.06E-07,

aJ1J2 = 7.88E-06. (i) Quantification of what percentage of the Lrig1+ cells express AR,

7 days after treatment with aRW, aJ1, aJ2 and aJ1J2. p-values: aJ1 = 0.117, aJ2 =

0.248, aJ1J2 = 0.091. (h and i) Total n of SGs quantified per treatment: aRW = 12, aJ1

= 12, aJ2 = 18, aJ1J2 = 16. (j,k) Representative co-stain images for Ki67 and FASN in

SGs from mice (n = 5 each) treated with aRW (j) and aJ2 (k), 7 days post treatment. (l)

Quantification of the number of cells expressing Ki67 in each SG, 7 days after treatment

with aRW, aJ1, and aJ2. p-values: aJ1 = 0.652, aJ2 = 0.009. Total n of SGs quantified

per treatment: aRW = 11, aJ1 = 12, aJ2 = 16. Student's T-test used for statistical

analysis. All treatments compared against aRW. Error bars represent SEM. Scale bars

are 25 μm.

Figure 5. The block in sebocyte differentiation is lifted upon recovery of Notch

activity.

(a) Representative H&E images of SGs from mice (n = 5 each) treated with aRW, aJ1,

aJ2 and aJ1J2, 14 days post treatment. (b) Quantification of type of SG found after

each treatment. The SGs were divided into three categories: normal SGs containing

characteristic number of sebocytes (normal SG), SGs containing a mix of sebocytes

and basal-like cells (mixed SG), and SGs containing no sebocytes and only basal-like

cells (no sebocyte SG). p-values: aJ1 = 0.535, aJ2 = 2.90E-87, aJ1J2 = 1.73E-92. Chi-

sqaure test used for statistical analysis. All treatments compared against aRW. Total n

of SGs quantified per treatment: aRW = 485, aJ1 = 430, aJ2 = 394, aJ1J2 = 364. Scale

bars are 100 µm. (c,d) Representative co-stain images for N1ICD and FASN in SGs

from mice (n = 5 each) treated with aRW (c) and aJ2 (d), 7 days post treatment. (e)

Quantification of the percentage of N1ICD+ cells in SGs from mice (n = 5 each) treated

with aRW and aJ2, 3 and 7 days post treatment. Percentage was calculated by dividing

the number N1ICD+ cells by total number of basal-like cells in each SG. p-values: for

comparison between day 3 and day 7 for aRW treatment = 0.297, for comparison

between day 3 and day 7 for aJ2 treatment = 1.00E-14. Total n of SGs quantified per

treatment: aRW at 3days = 13, aRW at 7days = 13, aJ2 at 3days = 15, aJ2 at 7 days =

22. (f,g) Representative adipophillin staining in SGs from mice (n = 5 each) treated with

aRW (f) and aJ2 (g), 14 days post treatment. (h) Quantification of the number of cells

expressing adipophilin in each SG, 7 and 14 days after treatment with aRW, and aJ2. p-

values: for comparison between day 7 and day 14 for aRW treatment = 0.292, for

comparison between day 7 and day 14 for aJ2 treatment = 1.38E-4. Total n of SGs

quantified per treatment: aRW at 7days = 18, aRW at 14days = 19, aJ2 at 7days = 22,

aJ2 at 14 days = 29. (i,j) Representative co-stain images for AR and FASN in SGs from

mice (n = 5 each) treated with aRW (i) and aJ2 (j), 14 days post treatment. (k)

Quantification of the number of cells expressing AR in each SG, 7 and 14 days after

treatment with aRW and aJ2. p-values: for comparison between day 7 and day 14 for

aRW treatment = 0.273, for comparison between day 7 and day 14 for aJ2 treatment =

9.53E-09. Total n of SGs quantified per treatment: aRW at 7days = 12, aRW at 14days

= 10, aJ2 at 7days = 18, aJ2 at 14 days = 23. Student's T-test used for statistical

analysis. Error bars represent SEM. Scale bars are 25 μm.

Figure S1. Sebaceous ducts remain unaffected after Notch inhibition. (Related to

Figure 1)

(a) Quantification of the percentage of SGs consisting of bursting sebocytes after each

treatment at 7 days. p-values: aJ1 = 0.662, aJ2 = 0.782, aJ1J2 = 0.219. (b)

Representative H&E images of SGs from mice (n = 5 each) treated with aRW, aJ1, aJ2

and aJ1J2, 7 days post treatment. Total n of SGs quantified per treatment: aRW = 66,

aJ1 = 66, aJ2 = 68, aJ1J2 = 47. Student's T-test used for statistical analysis. Error bars

represent SEM. Scale bars are 100 μm.

Figure S2. Notch is active in the sebaceous gland stem cells. (Related to Figure 2)

(a-c) Quantification of the location of N1ICD+ basal stem cells in SGs from mice (n = 5

each) treated with aRW (a), aJ1 (b) and aJ2 (c), 3 days post treatment. The SG was

divided into five sections along the proximal-distal axis. The number of N1ICD+ basal

stem cells in each section was divided by the total number of N1ICD+ basal stem cells

in each SG. Total n of SGs quantified per treatment: aRW = 13, aJ1 = 15, aJ2 = 15. (d)

Quantification of what percentage of the total basal stem cells (N1ICD+ and N1ICD-)

express both N1 ISH and J2 ISH. Total n of SGs quantified per treatment: aRW = 13,

aJ1 = 15, aJ2 = 15. (e,f) Representative triple stain images for N1ICD, Notch1 and Jag2

mRNA in SGs from mice (n = 5 each) treated with (e) aRW and (f) aJ2, 3 days post

treatment. (g) Quantification of the width of the IFE, 7 days after treatment with aRW,

aJ1, aJ2 and aJ1J2. p-values: aJ1 = 0.528, aJ2 = 0.885, aJ1J2 = 0.840. Total n of SGs

quantified per treatment: aRW = 26, aJ1 = 27, aJ2 = 27, aJ1J2 = 22. (h) Quantification

of the width of the adipocyte layer, 7 days after treatment with aRW, aJ1, aJ2 and

aJ1J2. p-values: aJ1 = 0.890, aJ2 = 0.948, aJ1J2 = 0.374. Total n of SGs quantified per

treatment: aRW = 13, aJ1 = 13, aJ2 = 15, aJ1J2 = 15. (i,j) Representative H&E images

of SGs from mice (n = 5 each) treated with aRW (i) and aJ2 (j), 7 days post treatment.

Student's T-test used for statistical analysis. Error bars represent SEM. Scale bars are

100 µm.

Figure S3. Loss of Notch activity in the SG stem cells inhibits sebocyte

differentiation. (Related to Figure 3)

(a) A representative co-stain image for N1ICD and FASN in an SG from mice (n = 5

each) treated with aJ1, 3 days post treatment. (b,c) Representative FASN staining in

SGs from mice (n = 5 each) treated with aRW (b) and aJ2 (c), 3 days post treatment. (d)

A representative adipophillin staining in an SG from mice (n = 5 each) treated with aJ1,

3 days post treatment. (e) A representative FASN staining in an SG from mice (n = 5

each) treated with aJ1, 3 days post treatment. (f,g) Representative FASN staining in

SGs from mice (n = 5 each) treated with aRW (f) and aJ2 (g), 7 days post treatment. (h)

A representative adipophillin staining in an SG from mice (n = 5 each) treated with aJ1,

7 days post treatment. (i) A representative FASN staining in an SG from mice (n = 5

each) treated with aJ1, 7 days post treatment. (j) A representative adipophillin staining

in an SG from mice (n = 5 each) treated with aJ1J2, 7 days post treatment. (i) A

representative FASN staining in an SG from mice (n = 5 each) treated with aJ1J2, 7

days post treatment. Scale bars are 25 µm.

Figure S4. Notch activity in the SG stem cells is required to prevent unregulated

progenitor proliferation. (Related to Figure 4)

(a,b) Representative co-stain images for Lrig1 and AR in SGs from mice (n = 5 each)

treated with aRW (a) and aJ1 (b), 3 days post treatment. (c-e) Representative co-stain

images for Lrig1 and AR in SGs from mice (n = 5 each) treated with aRW (c), aJ1 (d),

and aJ1J2 (e), 7 days post treatment. (f,g) Representative co-stain images for Ki67 and

FASN in SGs from mice (n = 5 each) treated with aRW (f) and aJ1 (g), 7 days post

treatment. Scale bars are 25 µm.

Figure S5. The block in sebocyte differentiation is lifted upon recovery of Notch

activity. (Related to Figure 5)

(a-c) Representative co-stain images for N1ICD and FASN in SGs from mice (n = 5

each) treated with aRW (a), aJ1 (b), and aJ1J2 (c), 7 days post treatment. (d)

Quantification of the percentage of N1ICD+ cells in SGs from mice (n = 5 each) treated

with aRW, aJ1, aJ2 and aJ1J2, 7 days post treatment. Percentage was calculated by

dividing the number N1ICD+ cells by total number of basal-like cells in each SG. p-

values: aJ1 = 0.878, aJ2 = 3.42E-21, aJ1J2 = 5.60E-09. Total n of SGs quantified per

treatment: aRW = 13, aJ1 = 13, aJ2 = 22, aJ1J2 = 13. (e-g) Representative adipophillin

staining in SGs from mice (n = 5 each) treated with aRW (e), aJ1 (f), and aJ1J2 (g), 14

days post treatment. (h) Quantification of the number of cells expressing adipophilin in

each SG, 14 days after treatment with aRW, aJ1, aJ2 and aJ1J2. p-values: aJ1 = 0.693,

aJ2 = 3.40E-08, aJ1J2 = 0.003. Total n of SGs quantified per treatment: aRW = 19, aJ1

= 13, aJ2 = 29, aJ1J2 = 16. (i-k) Representative co-stain images for AR and FASN in

SGs from mice (n = 5 each) treated with aRW (i), aJ1 (j), and a1J2 (k), 14 days post

treatment. (l) Quantification of the number of cells expressing AR in each SG, 14 days

after treatment with aRW, aJ1, aJ2 and aJ1J2. p-values: aJ1 = 0.248, aJ2 = 0.817,

aJ1J2 = 0.032. Total n of SGs quantified per treatment: aRW = 10, aJ1 = 7, aJ2 = 23,

aJ1J2 = 18.Student's T-test used for statistical analysis. Error bars represent SEM.

Scale bars are 25 µm.

References

Ables JL, Breunig JJ, Eisch AJ, Rakic P. 2011. Not(ch) just development: Notch
signalling in the adult brain. *Nat Rev Neurosci* **12**:269–283. doi:10.1038/nrn3024

Al-Zaid T, Vanderweil S, Zembowicz A, Lyle S. 2011. Sebaceous gland loss and
inflammation in scarring alopecia: A potential role in pathogenesis. *J Am Acad*
Dermatol **65**:597–603. doi:10.1016/j.jaad.2010.09.774

Andersen MS, Hannezo E, Ulyanchenko S, Estrach S, Antoku Y, Pisano S, Boonekamp
KE, Sendrup S, Maimets M, Pedersen MT, Johansen JV, Clement DL, Feral CC,
Simons BD, Jensen KB. 2019. Tracing the cellular dynamics of sebaceous gland
development in normal and perturbed states. *Nat Cell Biol* **21**:924–932.
doi:10.1038/s41556-019-0362-x

Belandia B, Powell SM, García-Pedrero JM, Walker MM, Bevan CL, Parker MG. 2005.
Hey1, a Mediator of Notch Signaling, Is an Androgen Receptor Corepressor. *Mol Cell*
Biol **25**:1425–1436. doi:10.1128/mcb.25.4.1425-1436.2005

Binczek E, Jenke B, Holz B, Günter RH, Thevis M, Stoffel W. 2007. Obesity resistance
of the stearoyl-CoA desaturase-deficient (scd1 -/-) mouse results from disruption of
the epidermal lipid barrier and adaptive thermoregulation. *bchm* **388**:405–418.
doi:10.1515/bc.2007.046

Blanpain C, Lowry WE, Pasolli HA, Fuchs E. 2006. Canonical notch signaling functions
as a commitment switch in the epidermal lineage. *Genes Dev* **20**:3022–3035.
doi:10.1101/gad.1477606

Buitrago W, Joseph AK. 2008. Sebaceous carcinoma: the great masquerader. *Dermatol*
Ther **21**:459–466. doi:10.1111/j.1529-8019.2008.00247.x

Cottle DL, Kretzschmar K, Schweiger PJ, Quist SR, Gollnick HP, Natsuga K, Aoyagi S,
Watt FM. 2013. c-MYC-Induced Sebaceous Gland Differentiation Is Controlled by an
Androgen Receptor/p53 Axis. *Cell Rep* **3**:427–441. doi:10.1016/j.celrep.2013.01.013

Estrach S, Ambler CA, Celso CLL, Hozumi K, Watt FM. 2006. Jagged 1 is a β-catenin
target gene required for ectopic hair follicle formation in adult epidermis.
Development **133**:4427–4438. doi:10.1242/dev.02644

Estrach S, Cordes R, Hozumi K, Gossler A, Watt FM. 2008. Role of the Notch Ligand
Delta1 in Embryonic and Adult Mouse Epidermis. *J Investig Dermatol* **128**:825–832.
doi:10.1038/sj.jid.5701113

Frances D, Niemann C. 2012. Stem cell dynamics in sebaceous gland morphogenesis
in mouse skin. *Dev Biol* **363**:138–146. doi:10.1016/j.ydbio.2011.12.028

Jung Y, Tam J, Jalian HR, Anderson RR, Evans CL. 2015. Longitudinal, 3D In Vivo
Imaging of Sebaceous Glands by Coherent Anti-Stokes Raman Scattering
Microscopy: Normal Function and Response to Cryotherapy. *J Investig Dermatol*
135:39–44. doi:10.1038/jid.2014.293

Kamińska A, Pardyak L, Marek S, Wróbel K, Kotula-Balak M, Bilińska B, Hejmej A.
2020. Notch signaling regulates nuclear androgen receptor AR and membrane
androgen receptor ZIP9 in mouse Sertoli cells. *Andrology* **8**:457–472.
doi:10.1111/andr.12691

Karnik P, Tekeste Z, McCormick TS, Gilliam AC, Price VH, Cooper KD, Mirmirani P.
2009. Hair Follicle Stem Cell-Specific PPARγ Deletion Causes Scarring Alopecia. *J*
Investig Dermatol **129**:1243–1257. doi:10.1038/jid.2008.369

Kretzschmar K, Cottle DL, Donati G, Chiang M-F, Quist SR, Gollnick HP, Natsuga K,
Lin K-I, Watt FM. 2014. BLIMP1 Is Required for Postnatal Epidermal Homeostasis
but Does Not Define a Sebaceous Gland Progenitor under Steady-State Conditions.
Stem Cell Rep **3**:620–633. doi:10.1016/j.stemcr.2014.08.007

Lafkas D, Shelton A, Chiu C, Boenig G de L, Chen Y, Stawicki SS, Siltanen C, Reichelt
M, Zhou M, Wu X, Eastham-Anderson J, Moore H, Roose-Girma M, Chinn Y, Hang
JQ, Warming S, Egen J, Lee WP, Austin C, Wu Y, Payandeh J, Lowe JB, Siebel CW.
2015. Therapeutic antibodies reveal Notch control of transdifferentiation in the adult
lung. *Nature* **528**:127–131. doi:10.1038/nature15715

Lavery DN, Villaronga MA, Walker MM, Patel A, Belandia B, Bevan CL. 2011.
Repression of Androgen Receptor Activity by HEYL, a Third Member of the
Hairy/Enhancer-of-split-related Family of Notch Effectors*. *J Biol Chem* **286**:17796–
17808. doi:10.1074/jbc.m110.198655

Lovászi M, Szegedi A, Zouboulis CC, Törőcsik D. 2017. Sebaceous-immunobiology is
orchestrated by sebum lipids. *Derm-Endocrinol* **9**:00–00.
doi:10.1080/19381980.2017.1375636

Mosteiro L, Nguyen TTT, Hankeova S, Alvarez-Sierra D, Reichelt M, Vandriel SM, Lai
Z, Choudhury FK, Sangaraju D, Kamath BM, Scherl A, Pujol-Borrell R, Piskol R,
Siebel CW. 2023. Notch signaling in thyrocytes is essential for adult thyroid function
and mammalian homeostasis. *Nat Metab* **5**:2094–2110. doi:10.1038/s42255-023-
00937-1

Nelson BR, Hamlet KR, Gillard M, Railan D, Johnson TM. 1995. Sebaceous carcinoma.
J Am Acad Dermatol **33**:1–15. doi:10.1016/0190-9622(95)90001-2

Niemann C, Horsley V. 2012. Development and homeostasis of the sebaceous gland.
Semin Cell Dev Biol **23**:928–936. doi:10.1016/j.semcdb.2012.08.010

Ostler DA, Prieto VG, Reed JA, Deavers MT, Lazar AJ, Ivan D. 2010. Adipophilin
expression in sebaceous tumors and other cutaneous lesions with clear cell
histology: an immunohistochemical study of 117 cases. *Mod Pathol* **23**:567–573.
doi:10.1038/modpathol.2010.1

Page ME, Lombard P, Ng F, Göttgens B, Jensen KB. 2013. The Epidermis Comprises
Autonomous Compartments Maintained by Distinct Stem Cell Populations. *Cell Stem
Cell* **13**:471–482. doi:10.1016/j.stem.2013.07.010

Pan Y, Lin M-H, Tian X, Cheng H-T, Gridley T, Shen J, Kopan R. 2004. γ-Secretase
Functions through Notch Signaling to Maintain Skin Appendages but Is Not Required
for Their Patterning or Initial Morphogenesis. *Dev Cell* **7**:731–743.
doi:10.1016/j.devcel.2004.09.014

Rittié L, Tejasvi T, Harms PW, Xing X, Nair RP, Gudjonsson JE, Swindell WR, Elder JT.
2016. Sebaceous Gland Atrophy in Psoriasis: An Explanation for Psoriatic Alopecia?
J Investig Dermatol **136**:1792–1800. doi:10.1016/j.jid.2016.05.113

Sato C, Zhao G, Ilagan MXG. 2012. An Overview of Notch Signaling in Adult Tissue
Renewal and Maintenance. *Curr Alzheimer Res* **9**:227–240.
doi:10.2174/156720512799361600

Schirra F, Suzuki T, Richards SM, Jensen RV, Liu M, Lombardi MJ, Rowley P, Treister
NS, Sullivan DA. 2005. Androgen Control of Gene Expression in the Mouse
Meibomian Gland. *Investig Opthalmology Vis Sci* **46**:3666. doi:10.1167/iovs.05-0426

Schneider MR, Paus R. 2010. Sebocytes, multifaceted epithelial cells: Lipid production
and holocrine secretion. *Int J Biochem Cell Biol* **42**:181–185.
doi:10.1016/j.biocel.2009.11.017

Seiffert K, Seltmann H, Fritsch M, Zouboulis C. 2007. Inhibition of 5α-Reductase Activity
in SZ95 Sebocytes and HaCaT Keratinocytes In Vitro. *Horm Metab Res* **39**:141–148.
doi:10.1055/s-2007-961814

Shi VY, Leo M, Hassoun L, Chahal DS, Maibach HI, Sivamani RK. 2015. Role of
sebaceous glands in inflammatory dermatoses. *J Am Acad Dermatol* **73**:856–863.
doi:10.1016/j.jaad.2015.08.015

Siebel C, Lendahl U. 2017. Notch Signaling in Development, Tissue Homeostasis, and
Disease. *Physiol Rev* **97**:1235–1294. doi:10.1152/physrev.00005.2017

Smith KR, Thiboutot DM. 2008. Thematic review series: Skin Lipids. Sebaceous gland
lipids: friend or foe? *J Lipid Res* **49**:271–281. doi:10.1194/jlr.r700015-jlr200

Stenn KS, Sundberg JP, Sperling LC. 1999. Hair Follicle Biology, the Sebaceous Gland,
and Scarring Alopecias. *Arch Dermatol* **135**:973–974.
doi:10.1001/archderm.135.8.973

Tran IT, Sandy AR, Carulli AJ, Ebens C, Chung J, Shan GT, Radojcic V, Friedman A,
Gridley T, Shelton A, Reddy P, Samuelson LC, Yan M, Siebel CW, Maillard I. 2013.
Blockade of individual Notch ligands and receptors controls graft-versus-host
disease. *J Clin Investig* **123**:1590–1604. doi:10.1172/jci65477

Veniaminova NA, Grachtchouk M, Doane OJ, Peterson JK, Quigley DA, Lull MV,
Pyrozhenko DV, Nair RR, Patrick MT, Balmain A, Dlugosz AA, Tsoi LC, Wong SY.
2019. Niche-Specific Factors Dynamically Regulate Sebaceous Gland Stem Cells in
the Skin. *Dev Cell* **51**:326-340.e4. doi:10.1016/j.devcel.2019.08.015

Veniaminova NA, Jia YY, Hartigan AM, Huyge TJ, Tsai S-Y, Grachtchouk M, Nakagawa
S, Dlugosz AA, Atwood SX, Wong SY. 2023. Distinct mechanisms for sebaceous

gland self-renewal and regeneration provide durability in response to injury. *Cell Rep*
42:113121. doi:10.1016/j.celrep.2023.113121

Watt FM, Estrach S, Ambler CA. 2008. Epidermal Notch signalling: differentiation,
cancer and adhesion. *Curr Opin Cell Biol* **20**:171–179. doi:10.1016/j.ceb.2008.01.010

Wilson A, Radtke F. 2006. Multiple functions of Notch signaling in self-renewing organs
and cancer. *FEBS Lett* **580**:2860–2868. doi:10.1016/j.febslet.2006.03.024

Wu Y, Cain-Hom C, Choy L, Hagenbeek TJ, Leon GP de, Chen Y, Finkle D, Venook R,
Wu X, Ridgway J, Schahin-Reed D, Dow GJ, Shelton A, Stawicki S, Watts RJ, Zhang
J, Choy R, Howard P, Kadyk L, Yan M, Zha J, Callahan CA, Hymowitz SG, Siebel
CW. 2010. Therapeutic antibody targeting of individual Notch receptors. *Nature*
464:1052–1057. doi:10.1038/nature08878

Yu J, Siebel CW, Schilling L, Canalis E. 2020. An antibody to Notch3 reverses the
skeletal phenotype of lateral meningocele syndrome in male mice. *J Cell Physiol*
235:210–220. doi:10.1002/jcp.28960

Figure 1. Jag2 is the dominant ligand involved in regulating sebocyte differentiation.

Figure 2. Notch is active in the sebaceous gland stem cells.

Figure 3. Loss of Notch activity in the SG stem cells inhibits sebocyte differentiation.

Figure 4. Notch activity in the SG stem cells is required to prevent unregulated progenitor proliferation.

Figure 5. The block in sebocyte differentiation is lifted upon recovery of Notch activity.