1   **Alveolar epithelium propagates mechanical signals that control multi-cellular**
2   **homeostasis in the lung**
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Abstract

Respiratory motion imposes a constant mechanical strain that has important but poorly defined

impact on tissue niches in the lung. We developed a reversible bronchial ligation model to induce

and reverse unilateral blockade of lung mechanical motion *in vivo* and show that this leads to

transcriptomic changes in multiple cell lineages that are not normalized upon reinitiation of

respiratory motion. Perturbation of mechanosignaling specifically in alveolar epithelial type I (AT1)

cells alters the transcriptomic state and fate of their niche neighbors, demonstrating that AT1 cells

act as a node that propagates a mechanical cascade throughout the lung alveolus. Mechanically

perturbed AT1 cells induce a distinct capillary endothelial cell state that persists after reactivation

of respiratory motion, which is mediated by an integrin/TGF-β network within the alveolus that is

vulnerable to pharmacological intervention. Importantly, AT1 mechanosignaling and intercellular

communication are altered in chronic human lung diseases, highlighting the critical role of an AT1-

driven mechanosensing network in lung disease biology. Thus, mechanosensing cells propagate

biophysical signals that regulate tissue function and program tissue responses in disease.

Introduction

Pulmonary gas exchange occurs within the alveoli, the elastic air sacs in the distal lung. During

respiration, the alveoli are subjected to a constant, cyclical mechanical strain, which facilitates

gas diffusion across a tight interface formed by the alveolar epithelium and the endothelium of the

adjacent capillary plexus, with a fused basement membrane in between these two cells[1,2]. In lung

diseases, this mechanical load is often disrupted, represented by damaged alveolar tissue

architecture and compliance[3]. Despite the importance of pulmonary mechanical homeostasis,

how these forces regulate cell behavior and fate within the gas exchange interface and the impact

this has on tissue structure and function is poorly understood.

Recent studies have shown that mechanical forces are essential for maintaining alveolar epithelial

cell fate and function[4-7]. Alveolar type II (AT2) epithelial progenitors require proper mechanical

forces to differentiate into alveolar type I (AT1) cells, which facilitate alveolar gas exchange with

the capillary endothelium[4-7]. AT1 cells exhibit high mechanosignaling activity and depend on

mechanotransduction to maintain their identity, with loss-of-function mechanosignaling leading to

their reprogramming into AT2 cells[4,8]. We have previously demonstrated that AT1 cells are

responsive to respiration-mediated mechanical forces *in vivo* by surgical blockade of lung motion[4].

Perturbed respiratory motion caused AT1 cells to reprogram into AT2 cells, mimicking the

phenotype observed upon attenuation of mechanotransduction in AT1 cells through loss of Hippo
signaling and actin dynamics[4,8]. However, in all of these models, loss of mechanical signaling was
permanent, which did not allow for the characterization of the impact that reinitiation of this
signaling process would have on cell fate and tissue dynamics.
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Here, we developed a reversible bronchial ligation model to induce temporary unilateral blockade
of lung motion in mice, followed by restoration of respiratory movements, and used this model to
characterize both transient and persistent alterations in cell fate and behavior induced by
respiration-mediated mechanical forces. This model has allowed us to generate a tissue-wide
mechanotransduction map in the lung at single-cell resolution. Analyses of our single-cell RNA
sequencing (scRNAseq) dataset demonstrate that temporary respiratory blockade can lead to
persistent cell transcriptomic alterations, which can occur through mechanisms beyond intrinsic
mechanotransduction in cells. These analyses reveal that AT1 cells are a node for
mechanotransduction in the lung alveolus that senses biophysical responses and propagates
mechanical signals to other niche neighbors including AT2 epithelial, alveolar fibroblast, and
CAP1 endothelial progenitors. Deregulation of mechanotransduction specifically in AT1 cells
induces an irreversible, transcriptionally distinct CAP state via intercellular integrin/TGF-β
signaling originated from AT1s. Human lung scRNAseq data indicate aberrant AT1
mechanosensing in chronic lung diseases, including opposing effects on chronic obstructive
pulmonary disease (COPD) and idiopathic pulmonary fibrosis (IPF). Together, our findings
demonstrate a pivotal role for an AT1 mechanosensing network that propagates a wave of
signaling throughout the alveolus critical for maintaining tissue integrity and can be used to
phenotype human lung diseases.
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<u>Results</u>
Mechanical forces maintain multi-cellular homeostasis of the lung alveolus
To understand how cells in the lung respond to changes in mechanical forces, we developed a
reversible bronchial ligation model to induce and reverse blockade in respiration-induced
mechanical forces *in vivo* (**Fig. 1a**)[4]. In this model, the left main bronchus of mice is ligated by a
micro-clip to temporarily restrain unilateral respiratory movements (Ligation, **Fig. 1a**), which can
be later removed to restore respiratory motion (Reversed, **Fig. 1a**). Reversed lungs were found
to be reinflated and their histological appearance by Hematoxylin and Eosin staining was relatively
normal (**Extended Data Fig. 1a-b**). We performed sham, ligation, or reversed surgery in adult
wildtype mice, isolated cells from the lungs and performed single-cell RNA sequencing (scRNA

seq) to determine transcriptomic changes in cells due to modulated mechanical forces (**Fig. 1b**).

All expected cell types were successfully captured in the scRNAseq experiment and annotated

(**Fig. 1c-f and Extended Data Fig. 1c**). We noticed altered transcriptome in various resident cell

types within the alveolus in response to restrained respiration, especially in progenitor cells such

as AT2 epithelial cells, CAP1 capillary endothelial cells and alveolar fibroblasts (**Fig. 1c-f**). Of

note, not all transcriptomic changes in these cell types were fully normalized after restored

respiratory motion. This suggests that disrupted mechanical forces can induce irreversible

transcriptomic changes in the lung even after normalization of respiration, with a potential impact

on progenitor cell function.

The facultative progenitor AT2 cells self-renew and differentiate into AT1 epithelial cells upon lung

injury[9-13]. Prior studies have demonstrated that mechanical forces are critical for AT2-to-AT1

differentiation[4-7]. In addition, AT1 cells are sensitive to mechanical strain and can reprogram into

AT2 cells in response to inhibited mechanical signaling[4,8]. Immunostaining of mouse lung tissues

using antibodies against AT1- or AT2-specific marker showed that compared to the sham

procedure, ligation induced a significant decrease in AT1 cell proportion, while AT2 cells showed

an increased percentage (**Fig. 1g and Extended Data Fig. 2a**). This is similar to what we have

previously shown and in line with AT1-to-AT2 reprogramming upon blocked mechanical forces.

After the procedure is reversed, AT1 and AT2 cell percentages were normalized, likely through

AT2-AT1 differentiation (**Fig. 1g**). Gene set enrichment analysis showed that Wnt and FGFR

signaling that are essential for AT2 progenitor cell function were downregulated in AT2 cells in

ligated mouse lungs but restored after reversal (**Extended Data Fig. 2b**)[12,14].

The lung capillary plexus and alveolar epithelium form a tight interface to facilitate efficient gas

exchange[1,2]. Capillary endothelium (CAPs) is comprised of two distinct populations, CAP1 which

are the proliferative progenitor subpopulation and CAP2 which exhibit a different phenotype

consisting of increased expression of angiogenic genes[15,16]. The regeneration of CAPs has been

shown to play a critical role in rebuilding lung tissue structure and function after acute injury and

is driven largely by proliferation and differentiation of CAP1s[17-20]. To understand how progenitor

CAPs respond to mechanical insults, we examined overall CAP proliferation by detecting cellular

5-ethynyl-2'-deoxyuridine (EdU) incorporation in mouse ligated lungs and those after reversed

surgery (**Extended Data Fig. 3a-b**). We found that baseline EdU incorporation in CAPs was

significantly reduced in the ligated mouse lungs (**Fig. 1h**). However, this was fully rescued when

the ligation is reversed (**Fig. 1h**). Some CAP transcriptomic changes induced by ligation were

reversed by ligation removal, such as changes in TGF-β signaling (**Extended Data Fig. 3c**).

Together, these findings suggests that mechanical forces are essential for maintaining the multi-

cellular integrity and function of the lung alveolus (**Fig. 1i**).

Cellular response to mechanical forces can be independent of intrinsic mechanosignaling

One of the primary transducers of mechanical forces into cells is the Hippo pathway, which is

controlled by two essential transcription co-factors, Yes-associated protein (YAP) and

transcriptional coactivator with PDZ-binding motif (TAZ) (**Fig. 2a**)[21-23]. To evaluate the changes in

cellular mechanosignaling, a transcriptional score was generated for each cell type based on the

expression profile of 22 known YAP/TAZ target genes (mechanoscore) (**Fig. 2a**)[24]. In the

homeostatic lung, cells exhibit differential levels of mechanotransduction based on this score, with

AT1 cells and mesenchymal cells showing the highest mechanosignaling activity relative to other

cell types (mech-high cells, **Fig. 2b-d**). Using Euclidian distance analysis, we quantified

transcriptomic changes in lung cells after bronchial ligation and upon reversal, based on their

proximity to baseline gene expression profiles. Ligation-induced transcriptomic changes were

noted in various resident cell types within the alveoli, including AT1 cells and all mesenchymal

cells, consistent with their sensitivity to this perturbation (**Fig. 2e-f and Extended Data Fig. 4a-**

b)[4,25,26]. We noted that transcriptional alterations in mesenchyme cells persisted after reversed

surgery, whereas the AT1 cell transcriptome was largely normalized, suggesting AT1 cells are

highly adaptable to respiration-mediated mechanical forces (**Fig. 2e and Extended Data Fig.**

4b). Interestingly, some cells with low baseline mechanical activity (mech-low cells) also exhibited

an altered transcriptomic profile in response to perturbed mechanical forces, e.g. AT2 cells and

CAPs (**Fig. 2g-h and Extended Data Fig. 4a-b**). These changes were not distinct to

mechanotransduction, suggesting that biophysical forces can regulate gene expression and cell

state in these mech-low cells via mechanisms beyond classical mechanical signaling (**Fig. 2g-h**

and Extended Data Fig. 4a-b). Together, these studies reveal how biophysical forces are sensed

at both cell-intrinsic and -extrinsic levels to maintain tissue homeostasis in a mechanically loaded

organ such as the lung.

AT1 cells are a node that propagates mechanical signaling cascades to neighboring cells

to control niche homeostasis

Within the alveoli, the large squamous AT1 cells occupy over 90% of the surface area[1,2]. AT1 cells

are adjacent to many other cells in the alveolar niche, including AT2 cells and CAPs, which play

an essential role in lung structure and function and communicate with AT1 cells[1,2,27,28]. Loss of

mechanical signaling in AT1 cells, either by loss of the pivotal cytoskeleton assembly gene *Cdc42*

or through bronchial ligation, causes AT1 cells to reprogram into AT2 cells[4]. Therefore, we

genetically deleted *Cdc42* in AT1 cells (*Cdc42*$^{AT1-KO}$) to determine the impact from loss of

mechanosignaling in AT1 cells on their alveolar neighbor cells using scRNAseq (**Fig. 3a**). Whole

lung scRNAseq analysis revealed that loss of mechanotransduction in AT1 cells led to altered

transcriptome of specific neighboring cell types, including AT2 cells, CAP1s and alveolar

fibroblasts (**Fig. 3b-e and Extended Data Fig. 5a-b**), supporting the concept that AT1 cells are a

node of mechanotransduction in the lung.

To further understand the impact of AT1 mechanoresponses on adjacent CAPs, we subseted

CAPs from *Cdc42*$^{AT1-KO}$ scRNAseq data to analyze their transcriptomic profile at a higher

resolution (**Fig. 3b and f**). We identified a CAP state specific to *Cdc42*$^{AT1-KO}$ lungs (AT1-induced

CAP) that was characterized by enriched expression of a set of genes including *Ntrk2* and *Cd74*

(**Fig. 3f-g**). To validate the presence of these cells, we isolated cells from control or *Cdc42*$^{AT1-KO}$

mouse lungs and performed flow cytometry analyses using a Tropomyosin receptor kinase B

(TrkB) antibody to quantitate the percentage of *Ntrk2*$^+$ CAPs. We confirmed that loss of *Cdc42* in

AT1 cells led to the emergence of *Ntrk2*$^+$ CAPs in mouse lungs in a time-dependent manner (**Fig.**

3h and Extended Data Fig. 6a). In addition, tissue immunostaining using TrkB antibody validated

the presence of *Ntrk2*$^+$ AT1-induced CAPs in mouse ligated lungs (**Fig. 3i**). These results indicate

that AT1 cells can transmit their mechanosensitive responses to neighboring cells to mediate lung

tissue homeostasis (**Fig. 3j**).

The AT1 mechanosensing-induced CAP state is permanent and functionally distinct

Given the alteration in CAP gene expression upon loss of *Cdc42* in AT1 cells, we next asked

whether this also occurred upon blockade of respiratory motion. We reclustered the CAP

populations in the scRNAseq data from sham, ligated, or reversed mouse lungs to identify

alterations in cell states (**Fig. 1b-c and Fig. 4a**). CAP1 progenitors and the intermediate

CAP1_CAP2 cell state were significantly altered at the transcriptional level, losing their

homeostatic state upon respiratory blockade (**Fig. 4a-b**). Instead, we identified a distinct

population of CAPs that emerged in ligated mouse lungs and persisted after reversal (Ligation-

induced CAP), with enriched expression of a number of genes induced by inhibiting

mechanotransduction in AT1 cells, e.g. *Ntrk2* (**Fig. 4a-c, Extended Data Fig. 7a-b**). Moreover,

we found that there was a strong correlation between the transcriptome of Ligation-induced CAPs

and AT1-induced CAPs, suggesting that they represent similar cell states (**Fig. 4d**). We hereafter

termed these *Ntrk2*^{+} CAPs as mechanically induced CAPs (miCAPs). The existence of miCAPs

was further validated in ligated and reversed mouse lungs by flow cytometry and tissue

immunostaining using TrkB antibody (**Fig. 4e-f**). Despite the persistence of miCAP state in the

reversed lung, we noted that these cells exhibited enhanced proliferation compared to TrkB[-]

endothelial cells (ECs) during reversal of bronchial ligation (**Extended Data Fig. 3a and 8a-c**). To

determine the fate change of miCAPs in this process, we used *Ntrk2*^{+} lineage tracing to track

miCAPs and noted that approximately 50% of the traced cells lost TrkB expression after

restoration of respiratory motion (**Fig. 4g and Extended Data Fig. 8d-i**). Interestingly, a similar

percentage of miCAPs were capable of differentiating into CAP2 cells upon ligation reversal (**Fig.**

4h-i). These results suggest that some miCAPs can differentiate into CAP2 cells during resolution

of lung motion blockade.

To investigate the cell of origin for the miCAPs, we utilized two previously validated lineage trace

mouse lines, *Kit*[MerCreMer]*; R26R*[tdTomato] and *Car4*[CreERT2]*; R26R*[tdTomato] to label CAP1s and CAP2s,

respectively, and track their cell state changes upon attenuated respiratory movements (**Fig. 4j**)[17].

CAP1- and CAP2-trace mice were given tamoxifen to initiate lineage tracing, followed by sham

or bronchial ligation surgery (**Fig. 4j**). Flow cytometry and IHC analyses indicated that both CAP1

and CAP2 lineage can give rise to miCAPs upon inhibition of respiratory motion (**Fig. 4k-l and**

Extended Data Fig. 9a).

To determine whether cell intrinsic mechanotransduction in CAP1 or CAP2 caused their state

switch to miCAPs, mouse lines were created to block intrinsic mechanotransduction in either

CAP1 or CAP2 by conditional knockout of *Cdc42* (*Cdc42*[CAP1-KO] or *Cdc42*[CAP2-KO], **Fig. 4m**). These

knockouts successfully attenuated mechanotransduction in CAPs, as indicated by decreased

expression of mechanosignaling target genes including *Ccn1*, *Ccn2* and *Ankrd1* (**Extended Data**

Fig. 9b)[24]. However, we did not observe the miCAP state arising from either CAP1 or CAP2

lineage upon cell intrinsic inhibition of mechanotransduction (**Fig. 4n and Extended Data. Fig.**

9c). Together, these findings indicate that this permanent miCAP state is functionally distinct and

its emergence is induced by defective mechanotransduction in neighboring AT1 cells.

AT1-endothelial mechanotransduction requires integrin/TGF-β signaling

To define the mechanisms by which AT1 cells sense and transmit mechanical signals to their

adjacent CAPs to induce the miCAP state, we analyzed the signaling pathways enriched in CAPs

from *Cdc42*[AT1-KO] mouse lungs using our scRNAseq data (**Fig. 3h and 5a**). The transforming

growth factor β (TGF-β) pathway was significantly upregulated in CAPs in response to *Cdc42*[AT1-

KO] (**Fig. 5a**). Of note, TGF-β signaling was also enriched in CAPs from the ligated mouse lungs

(**Extended Data Fig. 3c**). To validate altered TGF-β signaling in CAPs, we isolated CD31^{+} ECs

from control or *Cdc42*[AT1-KO] mouse lungs by fluorescence-activated cell sorting (FACS) and

examined phosphorylation of Suppressor of Mothers against Decapentaplegic (SMAD) proteins

2/3 (**Fig. 5b and Extended Data Fig. 10a**). Consistent with TGF-β signaling activation,

phosphorylated SMAD2/3 in ECs from *Cdc42*[AT1-KO] mouse lungs was significantly increased

relative to that from control (**Fig. 5b-c**)[29,30]. To assess the necessity of TGF-β signaling in the

development of miCAP state, we genetically deleted the gene encoding TGF-β receptor II in

mouse lung ECs (*Tgfbr2*[EC-KO]) and examined the emergence of miCAPs after bronchial ligation

(**Fig. 5d**)[31]. Attenuation of TGF-β signaling transduction inhibited the emergence of miCAPs,

shown by both flow cytometry and tissue immunostaining (**Fig. 5e-f and Extended Data Fig.**

10b), indicating that the development of miCAP state requires intact TGF-β signaling activity in

CAPs.

TGF-β signaling requires cell surface integrin heterodimers to sequester the latency-associated

peptide (LAP) in the latent TGF-β complex, releasing activated TGF-β ligands into the extracellular

matrix (ECM) for binding to cognate receptors[29,30,32]. We analyzed the level of integrin genes in

AT1 cells using our scRNA-seq data and noted that the expression of both *Itgav* and *Itgb6* were

increased in *Cdc42*[KO] lungs (**Fig. 5g**). Importantly, *Itgb6* is highly expressed in AT1 cells in the

mouse and human lung and to a lower level in AT2 cells (**Extended Data Fig. 11a-b**).

Immunoblotting using protein from FACS-isolated AT1 cells from control and *Cdc42*[AT1-KO] mouse

lungs confirmed the increased Itgav and Itgb6 protein levels in these cells upon *Cdc42*[KO] (**Fig. 5h**

and Extended Data Fig. 10a). We then determined whether these integrins are responsible for

AT1-endothelial mechanotransduction using a small molecule specifically inhibiting Itgb6

heterodimer and its resultant TGF-β activation (Itgb6i)[33]. Compared to vehicle control, the

administration of Itgb6i significantly inhibited miCAP emergence in *Cdc42*[AT1-KO] mouse lungs

shown by both flow cytometry and immunostaining (**Fig. 5i-j**). These results together reveal that

AT1 cells require Itgb6 integrin-mediated signaling for mechanical signal transmission to their

neighboring endothelial cells (**Fig. 5k**).

AT1 mechanosensing can distinguish human lung disease phenotypes

Many lung diseases are characterized by aberrant lung mechanics, which contributes to abnormal

respiratory function[3]. Fibrotic lung diseases, such as idiopathic pulmonary fibrosis (IPF), exhibit

increased tissue stiffness that leads to loss of alveolar capacity[3,34]. By contrast, obstructive lung

diseases, including chronic obstructive pulmonary disease (COPD), exhibit an emphysematous

phenotype resulting in hyperinflated and degenerated alveoli[3,35]. Using scRNAseq datasets from

human disease lungs, we generated a mechanosignaling gene expression score using same

YAP/TAZ target genes as described above to evaluate the mechanical activity of cells within the

alveoli (**Fig. 6a and Extended Data Fig. 12a**)[24,36]. Compared to other cells, AT1 cells showed

significant baseline mechanosignaling activity in healthy human lungs, consistent with our mouse

data (**Fig. 2b, 6a and Extended Data Fig. 12a**). Notably, AT1 mechanotransduction was

increased in COPD lungs but decreased in IPF (**Fig. 6a and Extended Data Fig. 12a**). In addition,

we analyzed our recent scRNAseq data from influenza infected mouse lungs and noted a

significant decrease in AT1 mechanotransduction in response to influenza lung injury using our

mechanoscore (**Extended Data Fig. 12b**)[17]**.** These findings suggest that AT1 cells are sensitive

to both acute viral injury and chronic disease associated changes in lung mechanics.

We further determined the communication between AT1 cells and their niche neighbors by

CellChat analysis using human disease scRNAseq data[36]. AT1 cells showed a significant

interaction with their niche neighbors in healthy lungs (**Fig. 6b**). However, in both human COPD

and IPF lungs, AT1-driven intercellular communication was greatly reduced, indicating that AT1

cells may require an appropriate level of mechanical load to maintain crosstalk with adjacent cells

(**Fig. 6b**). Interestingly, expression of mechanosignaling target genes showed distinct disease-

associated patterns (**Fig. 6c**). Expression of a subset of genes, such as *RBMS3* and *PTPN14,*

were dramatically downregulated in AT1 cells from IPF samples (**Fig. 6c-e**). Other

mechanosignaling genes including *CCN1* and *CCN2* were remarkably increased in AT1 cells from

COPD lungs, whereas these genes showed minimal changes in those from IPF (**Fig. 6c, f-g**).

These results suggest that AT1 cells rely on different transcriptional programs to mediate their

mechanosensing in fibrotic versus emphysematous diseases. Taken together, our findings

highlight that AT1 cells are a hub of alveolar mechanotransduction, propagating mechanical cues

during respiratory movements to maintain overall homeostasis of the lung alveolar niche.

<u>Discussion</u>

Biophysical forces impact cell and tissue behaviors in organs such as the lungs. However, which

cells are sensitive across the various regions of the lung and how such forces are interpreted and

propagated is not understood. Leveraging a reversible bronchial ligation model, we have now
demonstrated that respiration-mediated mechanical forces are essential for maintaining multi-
cellular homeostasis in the lung alveolus. These studies show that the AT1 lineage is a hub of
mechanical signaling in the alveolus, with AT1-specific blockade of mechanotransduction
transcriptionally altering neighboring cell lineages including CAPs. The AT1 mechanosensing-
induced changes in CAPs are significant and persistent, and are driven in part through
integrin/TGF-β signaling resulting from aberrant AT1 mechanosignaling. Mechanotransduction
also occurs in human AT1 cells and is altered in disease, and these changes can phenotypically
distinguish fibrotic versus emphysematous diseases. Thus, our study defines the niche-
dependent role for mechanotransduction in the lung alveolus and reveals that changes in specific
cell behavior and response are altered in chronic human lung diseases.
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Aberrant lung mechanics is a hallmark of various human lung diseases[3]. Chronic lung diseases
such as COPD and IPF are characterized by alterations in tissue elasticity and stiffness,
respectively[34,35]. In addition, in human patients, forced ventilation of the lungs in acute diseases
such as acute respiratory distress syndrome (ARDS) can lead to severe lung damage due to
changes in mechanical load[37]. The bronchial ligation model may lead to a better understanding
of mechanisms driven by deregulated lung mechaosignaling and provide insights on how aberrant
mechanics impact lung tissue structure and function in lung diseases. While genetic models of
mechanotransduction have led to important discoveries in lung homeostasis and function, most
of these models represent irreversible modulation in mechanotransduction and thus cannot be
utilized to assess the alterations that occur upon resolution of such inhibitory impulses[4,8,25]. The
development of the reversible bronchial ligation model has allowed us to study cellular changes
in response to release of lung motion blockade. The changes in cell transcriptome and state we
have observed suggest that even if lung motion and tissue architecture can be normalized,
persistent changes in cell state and behavior can occur, which may further impact tissue
responses to therapeutic interventions and subsequent insults and injuries. Moreover, clinical
treatments of various lung diseases involve interventions in lung mechanical load, such as
mechanical ventilation[38]. The reversible bronchial ligation model may also help understand
whether and how such temporarily altered lung mechanics may impact tissue structure and
function in the long term.
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Altered mechanosignaling in AT1 cells impacts the fate of multiple neighboring cell types including
endothelial cells. Blocking AT1 cell mechanotransduction induces a *Ntrk2+/CD74+* CAP state

(miCAP) that is also observed in our bronchial ligation model. Previous work has also revealed a

transcriptionally similar endothelial cell state that emerges after acute viral lung injuries and

chronic lung fibrosis[17,19,39,40]. suggesting the existence of miCAPs may arise from dysfunctional

AT1 mechanosensing during both acute and chronic diseases states. Compared to *Ntrk2-*

negative CAPs, miCAPs spontaneously respond to normalization of respiration-mediated

mechanical forces in our reversible bronchial ligation model by re-entering the cell cycle and

differentiating into CAP2s, indicating these cells can act as a potential progenitor during

endothelial regeneration after mechanical insults.

How mechanical forces are propagated between cells within a tissue niche has remained poorly

understood due to the complexities of studying multi-cellular biophysical force changes *in vivo*.

The induction of the miCAP state upon loss of mechanical signaling in AT1 cells is dependent on

endothelial TGF-β signaling induced by the AT1-specific integrin Itgb6. Multiple studies have

implicated integrin signaling including that by Itgb6 heterodimers in fibrotic diseases such as IPF.

This has led to the development of therapeutic strategies to treat lung fibrosis through inhibition

of integrins that blocks the resultant activation of TGF-β ligands[32,41-45]. This approach is validated

by our findings that Itgb6 blockade using a small molecule dramatically inhibited CAP phenotypic

changes driven by TGF-β signaling activation. Since *Itgb6* expression is restricted to AT1 cells in

both the mouse and human lung, blocking its function could have deleterious effects on certain

AT1-dependent lung function. Thus, while pharmacological Itgb6 inhibition can efficiently reduce

TGF-β-dependent tissue stiffening, it may also disrupt AT1 mechanosensing-mediated tissue

homeostasis and regeneration, leading to unexpected side effects. Therefore, a detailed

characterization of integrin function in distinct cell types may need to be revisited as these

therapies are developed for IPF and other diseases.

Lung diseases span a range of phenotypic changes in tissue architecture from pulmonary fibrosis

which is characterized by increased extracellular matrix (ECM) deposition and stiffing of lung

tissue, to emphysematous diseases such as COPD which are marked by loss of alveolar structure

and impaired tissue elasticity[3,34,35]. Our analysis reveals aberrant mechanotransduction in human

AT1 cells in both IPF and COPD lungs, suggesting AT1 mechanotransduction is sensitive to

abnormal tissue compliance. Whether and how AT1 mechanosensing-mediated cell responses

play a role in the onset and progression of these diseases requires further investigation.

Mechanotransduction in AT1 cells maintains the integrity of ECM through TGF-β signaling and

may act as a potential mechanism underlying compromised ECM deposition and function during

progressive pulmonary fibrosis and emphysema[28]. Furthermore, AT1 mechanosignaling-driven
gene transcription is distinct between IPF and COPD, suggesting that specific transcription
program may direct tissue towards fibrotic or emphysematous responses.
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Taken together, our studies highlight that AT1 cells propagate biophysical signals induced by
respiratory movements to maintain overall lung homeostasis. Dysregulated AT1 mechanosensing
leads to significant changes in fate and behavior of alveolar cells that are essential for lung
structure and function. In addition, AT1 mechanosensing is altered in both acute and chronic lung
diseases and can help phenotypically differentiate between fibrotic versus emphysematous
diseases. Future studies characterizing mechanosensing-induced tissue responses in complex
organs such as the lung will be critical to understand the mechanisms underlying onset and
progression of various diseases and could provide directions for the development of new
therapeutics.
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References
1   Weibel, E. R. Lung morphometry: the link between structure and function. *Cell Tissue Res*
367, 413-426 (2017). https://doi.org:10.1007/s00441-016-2541-4
2   Zepp, J. A. & Morrisey, E. E. Cellular crosstalk in the development and regeneration of the
respiratory system. *Nat Rev Mol Cell Biol* **20**, 551-566 (2019).
https://doi.org:10.1038/s41580-019-0141-3
3   Pride, N. B. & Macklem, P. T. in *Comprehensive Physiology*   659-692.
4   Shiraishi, K. *et al.* Biophysical forces mediated by respiration maintain lung alveolar
epithelial cell fate. *Cell* **186**, 1478-1492 e1415 (2023).
https://doi.org:10.1016/j.cell.2023.02.010
5   Wu, H. *et al.* Progressive Pulmonary Fibrosis Is Caused by Elevated Mechanical Tension
on Alveolar Stem Cells. *Cell* **180**, 107-121 e117 (2020).
https://doi.org:10.1016/j.cell.2019.11.027
6   Li, J. *et al.* The Strength of Mechanical Forces Determines the Differentiation of Alveolar
Epithelial Cells. *Dev Cell* **44**, 297-312 e295 (2018).
https://doi.org:10.1016/j.devcel.2018.01.008
7   Ahmed, D. W. *et al.* Local photocrosslinking of native tissue matrix regulates lung epithelial
cell mechanosensing and function. *Nat Mater* **24**, 1812-1825 (2025).
https://doi.org:10.1038/s41563-025-02329-0
8   Penkala, I. J. *et al.* Age-dependent alveolar epithelial plasticity orchestrates lung
homeostasis and regeneration. *Cell Stem Cell* **28**, 1775-1789 e1775 (2021).
https://doi.org:10.1016/j.stem.2021.04.026
9   Adamson, I. Y. R. & Bowden, D. H. The type 2 cell as progenitor of alveolar epithelial
regeneration: A cytodynamic study in mice after exposure to oxygen. *Laboratory
Investigation* **30**, 35-42 (1974).
10   Barkauskas, C. E. *et al.* Type 2 alveolar cells are stem cells in adult lung. *J Clin Invest*
123, 3025-3036 (2013). https://doi.org:10.1172/JCI68782
11   Zacharias, W. J. *et al.* Regeneration of the lung alveolus by an evolutionarily conserved
epithelial progenitor. *Nature* **555**, 251-255 (2018). https://doi.org:10.1038/nature25786

407 12 Liberti, D. C. *et al.* Alveolar epithelial cell fate is maintained in a spatially restricted manner
408   to promote lung regeneration after acute injury. *Cell Rep* **35**, 109092 (2021).
409   https://doi.org:10.1016/j.celrep.2021.109092

410 13 Strunz, M. *et al.* Alveolar regeneration through a Krt8+ transitional stem cell state that
411   persists in human lung fibrosis. *Nat Commun* **11**, 3559 (2020).
412   https://doi.org:10.1038/s41467-020-17358-3

413 14 Aros, C. J., Pantoja, C. J. & Gomperts, B. N. Wnt signaling in lung development,
414   regeneration, and disease progression. *Commun Biol* **4**, 601 (2021).
415   https://doi.org:10.1038/s42003-021-02118-w

416 15 Gillich, A. *et al.* Capillary cell-type specialization in the alveolus. *Nature* **586**, 785-789
417   (2020). https://doi.org:10.1038/s41586-020-2822-7

418 16 Niethamer, T. K. *et al.* Defining the role of pulmonary endothelial cell heterogeneity in the
419   response to acute lung injury. *Elife* **9** (2020). https://doi.org:10.7554/eLife.53072

420 17 Niethamer, T. K. *et al.* Longitudinal single-cell profiles of lung regeneration after viral
421   infection reveal persistent injury-associated cell states. *Cell Stem Cell* **32**, 302-321 e306
422   (2025). https://doi.org:10.1016/j.stem.2024.12.002

423 18 Zhao, G. *et al.* Regeneration of the pulmonary vascular endothelium after viral pneumonia
424   requires COUP-TF2. *Sci Adv* **6** (2020). https://doi.org:10.1126/sciadv.abc4493

425 19 Zhao, G. *et al.* Vascular endothelial-derived SPARCL1 exacerbates viral pneumonia
426   through pro-inflammatory macrophage activation. *Nat Commun* **15**, 4235 (2024).
427   https://doi.org:10.1038/s41467-024-48589-3

428 20 Zhao, G. *et al.* TGF-betaR2 signaling coordinates pulmonary vascular repair after viral
429   injury in mice and human tissue. *Sci Transl Med* **16**, eadg6229 (2024).
430   https://doi.org:10.1126/scitranslmed.adg6229

431 21 Ma, S., Meng, Z., Chen, R. & Guan, K. L. The Hippo Pathway: Biology and
432   Pathophysiology. *Annu Rev Biochem* **88**, 577-604 (2019).
433   https://doi.org:10.1146/annurev-biochem-013118-111829

434 22 Dobrokhotov, O., Samsonov, M., Sokabe, M. & Hirata, H. Mechanoregulation and
435   pathology of YAP/TAZ via Hippo and non-Hippo mechanisms. *Clin Transl Med* **7**, 23
436   (2018). https://doi.org:10.1186/s40169-018-0202-9

437 23 Dupont, S. *et al.* Role of YAP/TAZ in mechanotransduction. *Nature* **474**, 179-183 (2011).
438   https://doi.org:10.1038/nature10137

439 24 Wang, Y. *et al.* Comprehensive Molecular Characterization of the Hippo Signaling Pathway
440   in Cancer. *Cell Rep* **25**, 1304-1317 e1305 (2018).
441   https://doi.org:10.1016/j.celrep.2018.10.001

442 25 Liu, F. *et al.* Mechanosignaling through YAP and TAZ drives fibroblast activation and
443   fibrosis. *Am J Physiol Lung Cell Mol Physiol* **308**, L344-357 (2015).
444   https://doi.org:10.1152/ajplung.00300.2014

445 26 Tschumperlin, D. J., Ligresti, G., Hilscher, M. B. & Shah, V. H. Mechanosensing and
446   fibrosis. *J Clin Invest* **128**, 74-84 (2018). https://doi.org:10.1172/JCI93561

447 27 Zepp, J. A. *et al.* Genomic, epigenomic, and biophysical cues controlling the emergence
448   of the lung alveolus. *Science* **371** (2021). https://doi.org:10.1126/science.abc3172

449 28 Callaway, D. A. *et al.* TGF-beta controls alveolar type 1 epithelial cell plasticity and alveolar
450   matrisome gene transcription in mice. *J Clin Invest* **134** (2024).
451   https://doi.org:10.1172/JCI172095

452 29 Massague, J. & Sheppard, D. TGF-beta signaling in health and disease. *Cell* **186**, 4007-
453   4037 (2023). https://doi.org:10.1016/j.cell.2023.07.036

454 30 Massague, J. TGFbeta signalling in context. *Nat Rev Mol Cell Biol* **13**, 616-630 (2012).
455   https://doi.org:10.1038/nrm3434

456 31 Liu, B. *et al.* TMEM100, a Lung-Specific Endothelium Gene. *Arterioscler Thromb Vasc Biol*
457   **42**, 1495-1497 (2022). https://doi.org:10.1161/ATVBAHA.122.317683

32 Munger, J. S. *et al.* The integrin alpha v beta 6 binds and activates latent TGF beta 1: a
mechanism for regulating pulmonary inflammation and fibrosis. *Cell* **96**, 319-328 (1999).
https://doi.org:10.1016/s0092-8674(00)80545-0
33 Patsenker, E. *et al.* Inhibition of integrin alphavbeta6 on cholangiocytes blocks
transforming growth factor-beta activation and retards biliary fibrosis progression.
Gastroenterology **135**, 660-670 (2008). https://doi.org:10.1053/j.gastro.2008.04.009
34 Wijsenbeek, M. & Cottin, V. Spectrum of Fibrotic Lung Diseases. *N Engl J Med* **383**, 958-
968 (2020). https://doi.org:10.1056/NEJMra2005230
35 Christenson, S. A., Smith, B. M., Bafadhel, M. & Putcha, N. Chronic obstructive pulmonary
disease. *Lancet* **399**, 2227-2242 (2022). https://doi.org:10.1016/S0140-6736(22)00470-6
36 Jones, D. L. *et al.* An injury-induced mesenchymal-epithelial cell niche coordinates
regenerative responses in the lung. *Science* **386**, eado5561 (2024).
https://doi.org:10.1126/science.ado5561
37 Bos, L. D. J. & Ware, L. B. Acute respiratory distress syndrome: causes, pathophysiology,
and phenotypes. *Lancet* **400**, 1145-1156 (2022). https://doi.org:10.1016/S0140-
6736(22)01485-4
38 Walter, K. Mechanical Ventilation. *JAMA* **326**, 1452 (2021).
https://doi.org:10.1001/jama.2021.13084
39 Kong, C. S. L., V, M., Pantaleon-Garcia, J., Evans, S. E. & Chen, J. Truncated NTRK2 is
induced in CAP1 endothelial cells during mouse lung injury-repair. *iScience* **28**, 112973
(2025). https://doi.org:10.1016/j.isci.2025.112973
40 Raslan, A. A. *et al.* Lung injury-induced activated endothelial cell states persist in aging-
associated progressive fibrosis. *Nat Commun* **15**, 5449 (2024).
https://doi.org:10.1038/s41467-024-49545-x
41 Reed, N. I. *et al.* The alphavbeta1 integrin plays a critical in vivo role in tissue fibrosis. *Sci*
Transl Med **7**, 288ra279 (2015). https://doi.org:10.1126/scitranslmed.aaa5094
42 Koth, L. L. *et al.* Integrin beta6 mediates phospholipid and collectin homeostasis by
activation of latent TGF-beta1. *Am J Respir Cell Mol Biol* **37**, 651-659 (2007).
https://doi.org:10.1165/rcmb.2006-0428OC
43 Roy, A. *et al.* De novo design of highly selective miniprotein inhibitors of integrins
alphavbeta6 and alphavbeta8. *Nat Commun* **14**, 5660 (2023).
https://doi.org:10.1038/s41467-023-41272-z
44 Horan, G. S. *et al.* Partial inhibition of integrin alpha(v)beta6 prevents pulmonary fibrosis
without exacerbating inflammation. *Am J Respir Crit Care Med* **177**, 56-65 (2008).
https://doi.org:10.1164/rccm.200706-805OC
45 Madala, S. K. *et al.* Inhibition of the alphavbeta6 integrin leads to limited alteration of TGF-
alpha-induced pulmonary fibrosis. *Am J Physiol Lung Cell Mol Physiol* **306**, L726-735
(2014). https://doi.org:10.1152/ajplung.00357.2013
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Figure legends

Figure 1: Respiration-mediated mechanical forces maintain multi-cellular homeostasis of

the lung alveolus.

a. A schematic of reversible bronchial ligation model that modulates unilateral lung motion. **b.** A

schematic of scRNA seq experiment. Cells from wildtype CD1 mouse lungs after sham, bronchial

ligation or reversed surgery were isolated and used for scRNA seq analyses. **c.** A merged UMAP

plot of distal lung cells from sham, ligated and reversed mouse lungs. Cells were annotated by

cell type. **d-f.** UMAP plots of cells from indicated lineages annotated by cell type and treatment.

g. Percentage of AT1 and AT2 cells in indicated mouse lungs (n = 4 or 5, mean ± S.E.M.). Asterisks

indicate statistical significance (** *p* value < 0.01, unpaired two-tailed Student's *t* test). **h.**

Percentage of EdU incorporated endothelial cells in indicated mouse lungs (n = 5 or 6, mean ±

S.E.M.). Asterisks indicate statistical significance (* *p* value < 0.05, ** *p* value < 0.01, unpaired

two-tailed Student's *t* test). NS: no statistical significance. **i.** A model depicting mechanical force-

induced cell responses in the lung alveolus.

Figure 2: Alveolar cell responses to mechanical forces can be independent of intrinsic

mechanosignaling.

a. A schematic of the YAP/TAZ mechanosignaling pathway. 22 YAP/TAZ target genes reported in

Wang et al. 2018 were used to generate cell mechanoscore. **b.** A UMAP plot of distal lung cells

from sham mouse lungs. Cells were annotated by cell type. **c-d.** Baseline mechanoscore of each

cell type in the distal lung. Red dashed line in (**d**) indicates the mean of mechanoscore across all

cells. **e,g.** Euclidian distance indicating cellular transcriptional similarity across treatments. An

asterisk indicates statistical significance (* *p* value < 0.05, pairwise Wilcoxon test). NS: no

statistical significance. **f,h.** Mechanoscore of indicated cell types in sham, ligation, or reversed

mouse lungs. An asterisk indicates statistical significance (* *p* value < 0.05, pairwise Wilcoxon

test). NS: no statistical significance.

Figure 3: AT1 cells are a mechanotransduction node in the lung.

a. A schematic of genetic attenuation of mechanotransduction in AT1s. Control AT1-trace mice or

those with a *Cdc42*$^{fl/fl}$ allele were administrated with three doses of tamoxifen, followed by

tamoxifen diet. Cells from control or *Cdc42*$^{AT1-KO}$ mouse lungs were isolated and used for scRNA

seq analyses at indicated time points. **b.** A merged UMAP plot of distal lung cells from control or

Cdc42^{AT1-KO} mouse lungs. Cells were annotated by cell type. **c-e.** Euclidian distance indicating

cellular transcriptional similarity across treatments. Asterisks indicate statistical significance (* *p*

value < 0.05, pairwise Wilcoxon test). NS: no statistical significance. **f.** UMAP plots of CAPs from

control and *Cdc42*$^{AT1-KO}$ mouse lungs. Cells were annotated by cell type or treatment. **g.** A dot plot

showing expression of indicated genes in each cell type. **h.** Flow cytometry results showing the

percentage of AT1-induced CAP in *Cdc42*$^{AT1-KO}$ mouse lungs after three doses of tamoxifen for 14

or 28 days, or control mouse lungs (n = 5, mean ± S.E.M.). Asterisks indicate statistical

significance (** *p* value < 0.01, **** *p* value < 0.0001, unpaired two-tailed Student's *t* test). **i.**

Representative IHC images of control or *Cdc42*$^{AT1-KO}$ mouse lungs stained with TrkB and ERG

(scale bar = 25 μm). **j.** A model depicting AT1 cells as a node of mechanotransduction in the
alveolus.
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Figure 4: The AT1 mechanosensing-induced CAP state is permanent and functionally
distinct.
a. UMAP plots of CAPs from sham, ligated and reversed mouse lungs. Cells were annotated by
cell type or treatment. **b.** A bar plot showing percentage of each cell type in sham, ligated or
reversed mouse lungs. **c.** A feature plot showing *Ntrk2* expression in ligation-induced CAPs. **d.** A
Spearman correlation showing transcriptional similarity between AT1-induced CAPs and ligation-
induced CAPs. **e.** Flow cytometry results showing miCAP percentage in indicated lung tissues (n
= 5 or 6, mean ± S.E.M.). Asterisks indicate statistical significance (* *p* value < 0.05, *** *p* value <
0.001, unpaired two-tailed Student's *t* test). NS: no statistical significance. **f.** Representative IHC
images of indicated lung tissues stained with TrkB and ERG, a pan endothelial cell marker (scale
bar = 25 μm). **g.** A schematic of miCAP lineage trace experiment. miCAP-trace mice underwent
ligation surgery, received three doses of tamoxifen, followed by reversed procedure to restore
respiratory motion. Tissues from ligated or reversed miCAP-trace mouse lungs were used for
histology. **h.** Representative IHC images of indicated lung tissues stained with the lineage trace
marker (tdTomato), a CAP2 marker (CA4), and ERG (scale bar = 50 μm). **i.** Percentage of CA4^{+}
miCAP-trace endothelial cells in indicated tissues (n = 3 or 6, mean ± S.E.M.). Asterisks indicate
statistical significance (** *p* value < 0.01, unpaired two-tailed Student's *t* test). **j.** A schematic of
CAP lineage trace experiment. CAP1- or CAP2-trace mice were administrated with one dose of
tamoxifen, followed by sham or bronchial ligation surgery. Cells and tissues from control or ligated
lung were used for flow cytometry or histology, respectively. **k.** Flow cytometry results showing
miCAP percentage in indicated lung tissues (n = 3 or 4, mean ± S.E.M.). Asterisks indicate
statistical significance (* *p* value < 0.05, unpaired two-tailed Student's *t* test). **l.** Representative
IHC images of CAP1- (left) or CAP2-trace (right) mouse lungs after bronchial ligation stained with
the lineage trace marker (tdTomato), TrkB, and ERG (scale bar = 100 μm). **m.** A schematic of
genetic attenuation of mechanotransduction in CAPs. Control CAP-trace mice or those with a
Cdc42^{fl/fl} allele were administrated with three doses of tamoxifen. Cells from control or *Cdc42[CAP-*
KO] lung were used for flow cytometry. **n.** Flow cytometry results showing miCAP percentage in
indicated lung tissues (n = 4 or 5, mean ± S.E.M.). NS: no statistical significance. **o.** A model
depicting miCAP cell origin and fate change in response to mechanical forces.
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Figure 5: AT1-endothelial mechanotransduction requires integrin/TGF-β signaling.

a. A pathway enrichment analysis of CAPs from control and $Cdc42^{AT1-KO}$ (D14 and D28) mouse

lungs. **b.** An immunoblot showing phosphorylation of SMADs in endothelial cells from control and

$Cdc42^{AT1-KO}$ (D14) mouse lungs. Three independent mice were included in each group. **c.**

Quantification of p-SMAD level relative to total SMAD from immunoblots in (**b**) (n = 3, mean ±

S.E.M.). An asterisk indicates statistical significance (* p value < 0.05, unpaired two-tailed

Student's t test). NS: no statistical significance. **d.** A schematic of genetic attenuation of TGF-β

signaling in endothelial cells. Control EC-trace mice or those with a $Tgfbr2^{fl/fl}$ allele were

administrated with three doses of tamoxifen, followed by ligation surgery after 7 days. Cells and

tissues from ligated control or $Tgfbr2^{EC-KO}$ mouse lungs were used for flow cytometry or histology,

respectively. **e.** Flow cytometry results showing miCAP percentage in indicated lung tissues (n =

3 or 5, mean ± S.E.M.). An asterisk indicates statistical significance (* p value < 0.05, unpaired

two-tailed Student's t test). **f.** Representative IHC images of indicated lung tissues stained with

TrkB and ERG, a pan endothelial cell marker (scale bar = 25 μm). **g.** A dot plot showing indicated

$Integrin$ expression in AT1 cells from control and $Cdc42^{AT1-KO}$ mouse lungs. Red dashed boxes

indicate specific $Integrin$ with increased expression after $Cdc42^{AT1-KO}$. **h.** An immunoblot showing

increased level of Itgav and Itgb6 in AT1 cells from control and $Cdc42^{AT1-KO}$ mouse lungs. AT1

cells from three independent mice were pooled and used for protein extraction in each group. **i.**

Representative IHC images of lung tissues from $Cdc42^{AT1-KO}$ mice in the presence of vehicle or a

small-molecule Itgb6 inhibitor administration (scale bar = 25 μm). **j.** Flow cytometry results

showing miCAP percentage in indicated lung tissues (n = 4 or 5, mean ± S.E.M.). Asterisks

indicate statistical significance (** p value < 0.01, unpaired two-tailed Student's t test). **k.** A model

depicting integrin/ TGF-β-dependent crosstalk between AT1 cells and CAPs.

Figure 6: The AT1-driven mechanosensing network is altered in human lung disease.

a. Mechanoscore of indicated cells from human healthy, COPD, and IPF lung tissues generated

using pseudobulk aggregated expression of YAP/TAZ target genes described above in Fig. 2a

(median ± S.D.). An asterisk indicates statistical significance (* p value < 0.05, Kruskal-Wallis test

followed by Dunn test). **b.** CellChat analysis showing communication strength between indicated

cell types from human healthy, COPD, and IPF lung tissues. **c.** A heatmap showing expression of

YAP/TAZ target genes used for mechanoscore in AT1 cells from human healthy, COPD, and IPF

lung tissues. **d-g.** Pseudobulk aggregated expression of indicated genes in AT1 cells from human

healthy, COPD, and IPF lungs (median $\pm$ S.D.). An asterisk indicates statistical significance (* p

value < 0.05, Kruskal-Wallis test followed by Dunn test).

<u>Methods</u>

Human subjects

All human samples used in this study were obtained following an established protocol

(Prospective Registry of Outcomes in Patients Electing Lung Transplantation (PROPEL))

approved by University of Pennsylvania Institutional Review Board, as previously reported[36].

Informed consent was performed in accordance with institutional and NIH procedures. The

institutional review board of the University of Pennsylvania approved this study, and all patient

information was deidentified before use.

Mouse studies

All mouse experiments were performed following the protocols of the University of Pennsylvania

Institutional Animal Care and Use Committee. Adult mice (8-12 weeks old) were used in all the

experiments. Cre recombination was initiated by a single dose of tamoxifen (200 mg/kg Sigma-

Aldrich) for lineage tracing and 1 dose of tamoxifen (200 mg/kg, Sigma-Aldrich) daily for 3

consecutive days for conditional gene knockout, unless otherwise indicated. The small-molecule

Itgb6 inhibitor EMD527040 (Tocris Bioscience Cat#7508) was dissolved in 10% DMSO in saline

and administrated intraperitoneally at 20 mg/kg every other day.

Mouse lines used in this study were previously validated and the strains are listed below:

Mouse strain	Source	Catalog#
CD-1	Charles River	022
[46]$Hopx^{CreERT2}$	Jackson Laboratory	017606
$R26R^{EYFP}$	Jackson Laboratory	007903
[47]$Cdc42^{flox}$	Jackson Laboratory	027576
[48]$Ntrk2^{CreERT2}$	Jackson Laboratory	027214
[49]$Kit^{MerCreMer}$	Jackson Laboratory	032052
[17]$Car4^{CreERT2}$	Morrisey lab	NA
$R26R^{tdTomato}$	Jackson Laboratory	007914
[31]$TMEM100^{CreERT2}$	Jackson Laboratory	014159
$R26R^{ZsGreen}$	Jackson Laboratory	007906

^{50}Tgfbr2^{flox}	Jackson Laboratory	012603

Reversible bronchial ligation

Mice were anesthetized with isoflurane and intubated for ventilation using a MiniVent ventilator (Harvard apparatus; tidal volume of 10 µL per gram mouse body weight, respiratory rate of 150 breaths per minute). The thoracic cavity was exposed by incising 1 cm on the left lateral side of the skin, followed by a 0.5 cm incision at the third left intercostal space. The left main bronchus was clipped using a customized micro vascular clamp (Fine Science Tools Cat#00396-01, jaw dimension = 2 x 1 mm) with a micro clamp applying forceps (Fine Science Tools Cat#00071-14). For reversal, mice were anesthetized and intubated following the same protocol. An incision was made at the fourth left intercostal space to expose thoracic cavity, followed by removal of the clip.

Micro-computed tomography (uCT)

uCT images were generated using a X-Cube CT scanner (Molecubes) located at the Small Animal Imaging Facility at Penn Medicine. Live mice were anesthetized with isoflurane and images were acquired using a respiratory gating approach. The settings for image acquisition were as follows: reconstructed voxel size: 100 um, X-Ray tube voltage: 50 kVp, X-Ray tube current: 440 uA, exposure time: 32 ms, type of filter used: 0.8 mm aluminum filter, degree of rotation stepping: 0.75 degrees (480 total steps in a 360 degree scan).

Histology

For tissue preparation, mice were euthanized by CO_2 inhalation and the lungs were perfused with PBS, followed by inflation with 2% Paraformaldehyde (Thermo Fisher Scientific) at a constant pressure of 25 cm H_2O. Tissues were fixed at 4°C overnight and dehydrated in a series of ethanol concentration gradients. After dehydration, tissues were embedded in paraffin and sliced into 6 µm thick sections.

Hematoxylin and eosin (H&E) staining was performed as previously described[17,36]. For immunostaining, the following antibodies were used on paraffin tissue sections:

Antibody	Source	Catalog#
Goat polyclonal anti-TrkB	Novus Biologicals	AF1494
Mouse monoclonal anti-ERG	Abcam	ab214341
Rabbit monoclonal anti-ERG	Abcam	ab92513

Rabit polyclonal anti-RFP	Rockland	600-401-379
Rat monoclonal anti-LAMP3	Novus Biologicals	DDX0191P-100
Mouse monoclonal anti-HOPX	Santa Cruz	sc-398703
Rabbit monoclonal anti-NKX2.1 (TTF1)	Abcam	ab76013
Goat polyclonal anti-CA4	Novus Biologicals	AF2414

Imaging and image analysis

H&E stained lung sections were tile-scanned at 4x using a Nikon Eclipse Ni series microscope.

Fluorescent images were acquired at 20x and 40x using z-stacks on a Zeiss LSM 710 or Leica

Stellaris 5 laser scanning confocal microscope. Cell counting analysis was performed using FIJI.

Single cell isolation, flow cytometry, and FACS

Lungs were harvested and digested into single cell suspensions as previously described[17,36]. For

single cell dissociation from ligated mouse lungs, lungs were perfused, inflated with PBS, followed

by inflation with digestion buffer supplemented with collagenase I, dispase, and DNase I prior to

the removal of lobes.

For flow cytometry, cells were stained with combination of antibodies for 30 min on ice before

subjected to a flow cytometer. For FACS, lung cells were incubated with mouse CD45 MicroBeads

magnetic beads (Miltenyi Biotec Cat#130-052-301) and the CD45$^+$ population was depleted as

per the manufacturer's protocol. CD45$^-$ cells were then incubated with CD31 or/and CD326

antibodies and subjected to FACS for isolation of specific cell populations.

Antibodies used and dilutions are listed below:

Antibody (Dilution)	Source	Catalog#
CD45-PerCP-Cy5.5 (1:200)	Thermo Fisher	45-0451-82
CD45-PE-Cy7 (1:200)	Thermo Fisher	25-0451-82
CD45-APC-Cy7 (1:200)	BioLegend	103116
CD31-PE-Cy7 (1:200)	Thermo Fisher	25-0311-82
CD31-PE (1:200)	BioLegend	102508
CD326-PE-Cy7 (1:200)	Thermo Fisher	25-5791-80
TrkB-Biotin (1:100)	R&D systems	BAF1494
Streptavidin-APC (1:200)	Thermo Fisher	17-4317-82

EdU proliferation assay

5-Ethynyl-2'-deoxyuridine (Santa Cruz Biotechnology Cat#sc-284628B) was dissolved in tap

water at a concentration of 2 g/L, filtered through a 0.2 μm filter, and stored at 4°C. To create a

drinking water solution, this stock solution was diluted to a final concentration of 0.2 g/L in tap

water and sterile filtered. Mice consumed EdU water over the time course indicated. EdU

incorporation was detected using the Click-iT™ Plus EdU Alexa Fluor™ 488 Flow Cytometry

Assay Kit (Thermo Fisher #C10632) according to the manufacturer's protocol.

Immunoblotting alaysis

Total protein was extracted from FACS sorted lung endothelial cells or AT1 cells from indicated

animals using SDS sample buffer (BioRad) supplemented with 2-Mercaptoethanol (Sigma) and a

cocktail of protease and phosphatase inhibitors (Thermo). Samples were boiled for 5 min,

followed by SDS polyacrylamide gel electrophoresis. Proteins were then transferred to a

nitrocellulose membrane and immunoblotted. Primary and secondary antibodies used are listed

as below:

Antibody (Dilution)	Source	Catalog#
Rabbit monoclonal P-SMAD2/3 (1:1000)	Cell Signaling Technology	8828
Rabbit monoclonal SMAD2/3 (1:1000)	Cell Signaling Technology	8685
Rabbit polycloncal P-SMAD1/5/8 (1:1000)	Millipore Sigma	AB3848-I
Rabbit polycloncal SMAD1/5/8/9 (1:1000)	Abcam	ab13723
Rabbit monoclonal GAPDH (1:1000)	Cell Signaling Technology	8884
Rabbit monoclonal Itgav (1:1000)	Abcam	ab179475
Rabbit monoclonal Itgb6 (1:1000)	Abcam	ab187155
Rabbit monoclonal β-actin (1:1000)	Cell Signaling Technology	4970
Donkey anti-mouse HRP (1:10000)	Jackson Immunoresearch	715-035-150
Donkey anti-rabbit HRP (1:10000)	Jackson Immunoresearch	711-035-152

Quantitative RT-PCR

Total RNA was extracted from sorted CAP-trace cells using a RNeasy Mini Kit (Qiagen

Cat#74104), reverse transcribed to cDNA using a SuperScriptTM IV kit (Invitrogen

Cat#18091050), and used for quantitative PCR reaction on a QuantStudio 7 PCR System

(Applied Biosystems) using specific Taqman Probes (Thermo Fisher) or SYBR-Green primers

(Integrated DNA Technologies) as listed below:

SYBR-Green primer	Sequence
Cdc42 Forward	5'-GAGAAGCTGAGGACAAGATCTAA-3'
Cdc42 Reverse	5'-CACCATCACCAACAACAACAC-3'
Gapdh Forward	5'-AAATGGTGAAGGTCGGTGTGAACG-3'
Gapdh Reverse	5'-ATCTCCACTTTGCCACTGC-3'
Taqman probe	**Catalog#**
Ccn1	Mm00487498_m1
Ccn2	Mm01192233_g1
Ankrd1	Mm00496512_m1
Gapdh	Mm99999915_g1

scRNAseq and analysis

To create samples for scRNAseq that adequately represented both immune and non-immune

compartments, we used magnetic activated cell sorting (MACS) to isolate CD45$^+$ and CD45$^-$ cells

and recombined them at a ratio of 85% CD45- cells to 15% CD45+ cells. Cells were counted

using the Countess II FL Automated Cell Counter (Thermo Fisher) and loaded at a concentration

of 800-1000 cells/mL onto a 10X Chromium Next Gem Controller (10X Genomics) following the

manufacturer's instructions. cDNA and sequencing libraries were prepared using Chromium Next

GEM Single Cell 3' kit v3.1. cDNA and library quality control were performed using an Agilent

2100 Bioanalyzer using the Bioanalyzer High Sensitivity DNA kit (Agilent #5067-4626). Libraries

were then sequenced on an Illumina Novaseq 6000 instrument.

Read Alignment, UMI Processing, and Gene Quantification: Raw sequencing data (BCL files)

were converted to FASTQ format using bcl2fastq. Reads were aligned to the GRCm39 mouse

reference genome using STARsolo (STAR v2.7.11b)[51] for alignment, barcode and UMI correction,

and gene-level quantification in single-cell mode. STARsolo was run with 10x Genomics

Cellranger chemistry presets and configured to output both exonic gene counts (--soloFeatures

GeneFull). Only barcodes classified as valid cells by STARsolo's Emptydrops implementation.

Ambient RNA Correction: To reduce contamination from ambient RNA generated by lysed cells

during tissue dissociation, we applied SoupX (v1.6.0)[52] to each sample independently. For each

library, SoupX estimated the proportion of background RNA by identifying expression signatures

enriched in empty droplets relative to putative cell-containing droplets. The corrected count matrix

was obtained using the adjustCounts() function with sample-specific contamination fractions

estimated via the autoEstCont() workflow. Post-correction matrices were manually inspected to

ensure appropriate removal of canonical ambient signals (e.g., mitochondrial transcripts,

hemoglobin genes and ribosomal RNAs). Only contamination-adjusted matrices were used for

downstream analysis.

Quality Control and Filtering: Cells with fewer than 200 detected genes, cells exceeding three

median absolute deviations (MADs) above the gene-count distribution, cells with a

log10GenesPerUMI less than 80% and cells with more than 20% mitochondrial RNA content were

excluded. Potential doublets were identified using Scrublet and excluded. All remaining cells were

retained for downstream analysis. For experiments that included mixed sexes, X- and Y-linked

genes were removed from the variable feature set prior to PCA to prevent sex-specific effects

from dominating downstream analyses. Non-linear dimensionality reduction was performed using

Uniform Manifold Approximation and Projection (UMAP), and Louvain graph-based clustering was

applied, both using the top 30 principal components.

Marker genes for each cell type were identified using the FindAllMarkers command using the RNA

assay within Seurat. Correlation analysis was performed in R and correlation plots made using

ggcorrplot. Gene set enrichment analysis (GSEA) of gene ontology (GO) was performed using

the 'clusterProfiler' package (DOI: 10.18129/B9.bioc.clusterProfiler). Mechanoscore gene

signatures were obtained from a previously published YAP/TAZ target gene set[24]. Gene signature

activity scores were computed using the UCell R package, which implements a rank-based

method to quantify gene set enrichment at the single-cell level[53].

Cell–cell communication analysis was performed using CellChat v2, which infers intercellular

signaling networks by integrating known ligand–receptor interactions with single-cell

transcriptomic data[54]. For this study, CellChat analysis was restricted to a biologically relevant

subset of cell types derived from the human disease samples. All analyses were carried out

following the standard CellChat workflow, including data preprocessing, identification of

overrepresented ligand–receptor pairs, inference of communication probabilities, and

visualization of network-level signaling patterns.

To minimize technical and biological variation, we used a pseudobulk framework in which single-

cell counts were aggregated at the donor–cell type level. For each annotated cell type, all cells

from the same donor were summed to generate a donor-level expression profile. Pseudobulk

matrices were constructed using the Seurat2pb function implemented within the edgeR package[55]. Heatmaps were constructed using the Complexheatmap package in R.

Statistical analysis

In all mouse experiments, statistical significance was determined by an unpaired two-tailed Student's *t* test between two groups using Graphpad Prism 10. Statistical analysis of scRNA seq data was performed in R. Details of statistical analysis used for each experiment are indicated in the figure legends.

Methods references

Takeda, N. *et al.* Interconversion between intestinal stem cell populations in distinct niches. *Science* **334**, 1420-1424 (2011). https://doi.org:10.1126/science.1213214
Chen, L. *et al.* Cdc42 deficiency causes Sonic hedgehog-independent holoprosencephaly. *Proc Natl Acad Sci U S A* **103**, 16520-16525 (2006). https://doi.org:10.1073/pnas.0603533103
Rutlin, M. *et al.* The cellular and molecular basis of direction selectivity of Adelta-LTMRs. *Cell* **159**, 1640-1651 (2014). https://doi.org:10.1016/j.cell.2014.11.038
van Berlo, J. H. *et al.* c-kit+ cells minimally contribute cardiomyocytes to the heart. *Nature* **509**, 337-341 (2014). https://doi.org:10.1038/nature13309
Leveen, P. *et al.* Induced disruption of the transforming growth factor beta type II receptor gene in mice causes a lethal inflammatory disorder that is transplantable. *Blood* **100**, 560-568 (2002). https://doi.org:10.1182/blood.v100.2.560
Dobin, A. *et al.* STAR: ultrafast universal RNA-seq aligner. *Bioinformatics* **29**, 15-21 (2013). https://doi.org:10.1093/bioinformatics/bts635
Young, M. D. & Behjati, S. SoupX removes ambient RNA contamination from droplet-based single-cell RNA sequencing data. *Gigascience* **9** (2020). https://doi.org:10.1093/gigascience/giaa151
Feichtinger, X. *et al.* Improved biomechanics in experimental chronic rotator cuff repair after shockwaves is not reflected by bone microarchitecture. *PLoS One* **17**, e0262294 (2022). https://doi.org:10.1371/journal.pone.0262294
Jin, S., Plikus, M. V. & Nie, Q. CellChat for systematic analysis of cell-cell communication from single-cell transcriptomics. *Nat Protoc* **20**, 180-219 (2025). https://doi.org:10.1038/s41596-024-01045-4
Robinson, M. D., McCarthy, D. J. & Smyth, G. K. edgeR: a Bioconductor package for differential expression analysis of digital gene expression data. *Bioinformatics* **26**, 139-140 (2010). https://doi.org:10.1093/bioinformatics/btp616

Acknowledgements

We thank the Flow Cytometry Core Laboratory at the Children's Hospital of Philadelphia, the Cell and Developmental Biology Microscopy Core at the University of Pennsylvania (UPenn), and the Rodent Cardiovascular Phenotyping Core at the Cardiovascular Institute of UPenn, for their technical assistance. This research was supported by the National Institutes of Health (R01HL164929, R01HL152194, R01HL132999, R01HL162683, R01HL168803 to E.E.M.).

Author contributions

Conceptualization: C.S. and E.E.M. Methodology: C.S., M.P.M., S.E.S., G.Z., J.D.P., U.V.C., D.L.J., M.K., Y.Y., S.Z., S.L., H.H., and A.L. Investigation: C.S., M.P.M., S.E.S., G.Z., and J.D.P. Visualization: C.S., M.P.M., J.D.P., and E.E.M. Supervision: M.C.B. and E.E.M. Writing: C.S. and E.E.M.

Competing interest

The authors declare no competing interests.

Data availability

All newly generated mouse scRNAseq data have been deposited into GEO (GSE310385).

Extended data figure legends

Extended Data Figure 1: Reversed surgery rescues motion blockade from bronchial ligation.

a. Representative micro-CT scan images showing restored lung inflation after clip removal in mouse ligated lungs. A schematic of experiment is shown in Fig. 1b. **b.** Representative H&E images of indicated mouse lungs. A schematic of experiment is shown in Fig. 1b. **c.** A dot plot showing marker gene expression in each cell type from the reversible bronchial ligation scRNAseq dataset. A schematic of experiment is shown in Fig. 1b and a UMAP is shown in Fig. 1c.

Extended Data Figure 2: Respiration-mediated mechanical forces control alveolar epithelial composition.

a. Representative IHC images of indicated lung tissues stained with HOPX (AT1 cell marker), LAMP3 (AT2 cell marker) and NKX2.1 (pan epithelial cell marker) (scale bar = 50 μm). A quantification of AT1/AT2 ratio in each condition is shown in Fig. 1g. **b.** Gene set enrichment analysis results showing altered pathways in AT2 cells from indicated mouse lungs.

Extended Data Figure 3: Respiration-mediated mechanical forces control alveolar endothelial cell proliferation.

a. A schematic of flow cytometry experiment determining proliferation in lung endothelial cells (ECs). EdU water (0.2 g/L) was provided to mice during indicated time periods. Cells from wildtype

mouse after sham, ligation or reversed surgery were isolated and used for flow cytometry. **b.**

Representative gating strategies of flow cytometry detecting EdU$^+$ ECs. A quantification of EdU$^+$

ECs in each condition is shown in Fig. 1h. **c.** Gene set enrichment analysis results showing altered

pathways in capillary endothelial cells (CAPs) from indicated mouse lungs.

Extended Data Figure 4: Respiration-mediated mechanical forces control gene

transcription in lung cells.

a. Mechanoscore of each cell type in the distal lung after sham, ligation or reversed surgery. Red

dashed line indicates the mean of mechanoscore across all cells at baseline. **b.** Euclidian distance

indicating cellular transcriptional similarity across treatments in indicated cell types.

Extended Data Figure 5: Perturbed mechanosignaling in AT1 cells alters gene transcription

in neiboring cells within the alveolus.

a. A dot plot showing marker gene expression in each cell type from the *Cdc42*$^{AT1\text{-}KO}$ scRNA seq

dataset. A schematic of experiment is shown in Fig. 3a and a UMAP is shown in Fig. 3b. **b.**

Euclidian distance indicating cellular transcriptional similarity across treatments in indicated cell

types.

Extended Data Figure 6: Perturbed mechanosignaling in AT1 cells induces the emergence

of TrkB$^+$ CAP state.

a. Representative gating strategies of flow cytometry detecting TrkB$^+$ ECs. A quantification of TrkB

$^+$ ECs in each condition is shown in Fig. 3h.

Extended Data Figure 7: Expression of signature genes in miCAPs.

a-b. Feature plots showing expression of miCAP signature genes in CAP subset from (**a**)

reversible ligation or (**b**) *Cdc42*$^{AT1\text{-}KO}$ scRNA seq dataset.

Extended Data Figure 8: The miCAP state is functionally distinct.

a-b. Representative gating strategies of flow cytometry detecting EdU$^+$ miCAPs. A schematic of

experiment is shown in Extended Data Fig. 3a. **c.** Quantification of EdU$^+$ miCAPs or TrkB$^-$ ECs in

each condition (n = 5, mean $\pm$ S.E.M.). Asterisks indicate statistical significance (* p value < 0.05,

** p value < 0.01, unpaired two-tailed Student's t test). NS: no statistical significance. **d.** A

schematic of miCAP lineage labelling. *Ntrk2*^{CreERT2}*; R26R*^{tdTomato} mice received bronchial ligation

surgery, followed by three doses of tamoxifen before euthanasia. Cells and tissues from ligated

864 mouse lungs were used for flow cytometry and immunostaining, respectively. **e.** Representative

865 IHC images of indicated lung tissues stained with RFP (miCAP lineage trace marker), TrkB, and

866 ERG (scale bar = 25 μm). Yellow arrows indicated miCAP lineage[+] ECs that marked by TrkB

867 expression. **f-g.** Representative flow cytometry gating showing (**f**) efficiency and (**g**) specificity of

868 miCAP lineage trace model. **h.** Representative IHC images of indicated lung tissues stained with

869 RFP (miCAP lineage trace marker), TrkB, and ERG (scale bar = 25 μm). Yellow arrows indicated

870 miCAP lineage[+] ECs that retained TrkB expression, whereas cyan arrows indicated those that

871 lost TrkB expression. **i.** Quantification showing miCAP-trace ECs that are positive for TrkB

872 expression after ligation or reversed surgery (n = 3 or 6, mean ± S.E.M.). Asterisks indicate

873 statistical significance (**** *p* value < 0.0001, unpaired two-tailed Student's *t* test).

875 **Extended Data Figure 9: miCAP emergence is independent of intrinsic CAP**

876 **mechanosignaling.**

877 **a.** Representative gating strategies of TrkB[+] CAP1- or CAP-trace ECs after ligation. A schematic

878 of experiment is shown in Fig. 4j and a quantification is shown in Fig. 4k. **b.** Quantitative RT-PCR

879 showing the downregulation of mechanosignaling sensitive genes (*Ccn1*, *Ccn2*, *Ankrd1*) after

880 *Cdc42* knockout in CAP1 or CAP2s (n = 4 or 5, mean ± SEM). *Ankrd1* expression was not

881 detected in CAP1 and CAP2 after ligation (n = 1 from each group). Asterisks indicate statistical

882 significance (* *p* value < 0.05, ** *p* value < 0.01, *** *p* value < 0.001, unpaired two-tailed Student's

883 *t* test). **c.** Representative gating strategy of TrkB[+] CAP1- or CAP2-trace ECs after lineage-specific

884 *Cdc42* deletion. A schematic of experiment is shown in Fig. 4m and a quantification is shown in

885 Fig. 4n.

887 **Extended Data Figure 10: Representative FACS and flow cytometry gating strategies.**

888 **a.** Representative gating strategies to isolate lung ECs and AT1 cells by FACS. **b.** Representative

889 flow cytometry gating of TrkB[+] ECs after ligation in control or *Tgfbr2*[EC-KO] mouse lungs. A schematic

890 of experiment is shown in Fig. 5d and a quantification is shown in Fig. 5e.

892 **Extended Data Figure 11: Integrin β6 is specifically expressed in AT1 cells.**

893 **a-b.** UMAP plots showing expression of the gene encoding integrin β6 in wildtype (**a**) mouse or

894 (**b**) human lungs. Data in **a.** was also shown in Fig. 2b.

Extended Data Figure 12: AT1 mechanosignaling is altered in acute lung injury and chronic
lung diseases.
a. Mechanoscore of indicated cell types in the tissue from human healthy, COPD, and IPF lungs
(Habermann *et al*. 2020, GSE135893; Adams *et al*. 2020, GSE136831) generated using
pseudobulk aggregated expression of YAP/TAZ target genes (median $\pm$ S.D.). **b.** Mechanoscore
of indicated cell types in control and influenza infected mouse lungs (Niethamer *et al*. 2025,
GSE262927). An asterisk indicates statistical significance (* p value < 0.05, pairwise Wilcoxon
test).

Figure 1

a Mechanical force level in the left lung

Sham → Bronchial ligation → Ligation (Micro-clip) → Clip removal → Reversed

b Mouse: Wildtype CD1

Sham or bronchial ligation
Day 0 — 14
Left lung scRNA seq

Bronchial ligation / Clip removal
Day 0 — 14 — 28
Left lung scRNA seq

c Merged

AT1, AT2, Secretory, Ciliated, CAP1, CAP1_CAP2, CAP2, CAP_proliferating, AEC, LEC, VEC, Alveolar_fibroblast, Adventitial_fibroblast, Peribronchial_fibroblast, Pericyte, VSMC, Mesothelium, aMAC, iMAC, cMON, ncMON, cDC1, cDC2, Neutrophil, Mast_basophil, pDC, T, NK, B

d Epithelium — AT1, AT2, Secretory, Ciliated; Sham, Ligation, Reversed

e Endothelium — CAP1, CAP1_CAP2, CAP2, CAP_proliferating, AEC, LEC, VEC; Sham, Ligation, Reversed

f Mesenchyme — Alveolar_fibroblast, Adventitial_fibroblast, Peribronchial_fibroblast, Pericyte, VSMC, Mesothelium; Sham, Ligation, Reversed

g Epithelium — % Cells (AT1, AT2); Sham, Ligation, Reversed

h Endothelium — % EdU$^+$ EC; Sham, Ligation, Reversed

i Mechanical forces — Low / High; O_2, CO_2; AT1, AT2, CAP, Fibroblast

Figure 2

Figure 3

a

Mouse:
Ctrl: $Hopx^{CreERT2}; R26R^{EYFP}$
$Cdc42^{AT1-KO}$: $Hopx^{CreERT2}; Cdc42^{fl/fl}; R26R^{EYFP}$

TAM diet

Day -3 0 ... 14 ... 28

Whole lung scRNA seq

b Merged

- AT1
- AT2
- AT1_AT2
- Secretory
- Ciliated
- CAP1
- CAP1_CAP2
- CAP2
- AEC
- LEC
- VEC
- Alveolar_fibroblast
- Adventitial_fibroblast
- Peribronchial_fibroblast
- Pericyte
- VSMC
- Mesothelium
- aMAC
- iMAC
- cMON
- ncMON
- cDC1
- cDC2
- Neutrophil
- pDC
- T
- NK
- B

c AT2

Cdc42KO_d28
Cdc42KO_d14
Ctrl

Euclidean distance

d CAP1

Cdc42KO_d28
Cdc42KO_d14
Ctrl

Euclidean distance

e Alveolar fibroblast

Cdc42KO_d28
Cdc42KO_d14
Ctrl

Euclidean distance

f Capillary endothelium

- CAP1
- CAP1_CAP2
- CAP2
- AT1-induced CAP

$Cdc42^{AT1-KO}$

Ctrl   D14   D28

g CAP marker gene

Gpihbp1
Kit
Ednrb
Car4
Ntrk2
Cd74

CAP1 CAP1_CAP2 CAP2 AT1-induced CAP

Avg. Expr.
1.0
0.5
0
-0.5
-1.0

% Expr.
25
50
75

h AT1-induced CAP

****
**

Ctrl   D14   D28
$Cdc42^{AT1-KO}$

TrkB$^+$/Total CD31$^+$ cells (%)

i TrkB ERG DAPI

Ctrl $Cdc42^{AT1-KO}$ D14 $Cdc42^{AT1-KO}$ D28

j Mechanical signals

AT1   AT2

CAP $Ntrk2^+$ CAP   Alveolar fibroblast

Figure 4

a Capillary endothelium

CAP1
CAP1_CAP2
CAP2
Ligation-induced CAP

Sham   Ligation   Reversed

b Percentage of cells
CAP1
CAP1_CAP2
CAP2
Ligation-induced CAP

c *Ntrk2*

d
	Ligation-induced CAP	AT1-induced CAP D14	AT1-induced CAP D28
AT1-induced CAP D28	0.89	0.95	1
AT1-induced CAP D14	0.89	1	
Ligation-induced CAP	1		

e miCAP percentage
TrkB⁺/Total CD31⁺ cells (%)
Sham   Ligation   Reversed
*** * NS

f Sham   Ligation   Reversed
TrkB ERG DAPI

g Mouse:
miCAP trace: *Ntrk2^{CreERT2}; R26R^{tdTomato}*
Bronchial ligation
TAM
Day -14   -3 0   28
Clip removal Left lung analyses

h Ligation   Reversed
miCAP trace CA4 ERG DAPI

i miCAP-trace CAP2
CA4⁺ miCAP-trace cells (%)
Ligation   Reversed
**

j Mouse:
CAP1 trace: *Kit^{MerCreMer}; R26R^{tdTomato}*
CAP2 trace: *Car4^{CreERT2}; R26R^{tdTomato}*
TAM   Bronchial ligation
Day -14   0   14
Left lung analyses

k miCAP percentage
TrkB⁺/Total traced EC (%)
Sham
Ligation
CAP1   CAP2
* *

l CAP1 trace TrkB ERG DAPI   CAP2 trace TrkB ERG DAPI
Ligation

m Mouse:
Ctrl:
CAP1 or CAP2 trace
Cdc42^{CAP1-KO}:
Kit^{MerCreMer}; Cdc42^{fl/fl}; R26R^{tdTomato}
Cdc42^{CAP2-KO}:
Car4^{CreERT2}; Cdc42^{fl/fl}; R26R^{tdTomato}
TAM
Day -3 0   14
Whole lung analyses

n miCAP percentage
TrkB⁺/Total traced EC (%)
Ctrl
Cdc42^{KO}
CAP1   CAP2
NS   NS

o Mechanical signals   Mechanical force level
AT1   CAP1
CAP2   miCAP
miCAP
CAP2

Figure 5

a Enriched CAP pathway in *Cdc42*^AT1-KO

TGF-beta Signaling
PI3K/AKT/mTOR Signaling
Apoptosis
Coagulation
Apical Junction

-log10 (p.adjust)

b Lung EC: Ctrl | *Cdc42*^AT1-KO
Mouse# 1 2 3 1 2 3
P-SMAD2/3
SMAD2/3
P-SMAD1/5/8
SMAD1/5/8
GAPDH

c SMAD phosphorylation
Relative P-/Total SMAD (%)
P-SMAD2/3   P-SMAD1/5/8
*   NS
● Ctrl   ● *Cdc42*^AT1-KO

d Mouse:
Ctrl:
Tmem100^CreERT2; *R26R*^ZsGreen
**Tgfbr2*^EC-KO:
Tmem100^CreERT2; *Tgfbr2*^fl/fl; *R26R*^ZsGreen

TAM   Bronchial ligation
Day -10-7   0   14
Left lung analyses

e miCAP percentage
TrkB^+/Total CD31^+ cells (%)
Ctrl   *Tgfbr2*^EC-KO
*

f Ligation:
Ctrl | *Tgfbr2*^EC-KO
TrkB ERG DAPI

g Integrins in AT1 cells
Itga3
Itgav
Itgb1
Itgb5
Itgb6
Ctrl   Cdc42KO_d14   Cdc42KO_d28
Avg. Expr. 20 40 60 80
% Expr. 1.0 0.5 0.0 -0.5 -1.0

h AT1:   *Cdc42*^KO
Ctrl D14 D28
Itgav
Itgb6
β-actin

i *Cdc42*^AT1-KO:
Vehicle | Itgb6i
TrkB ERG DAPI

j miCAP percentage
TrkB^+/Total CD31^+ cells (%)
Vehicle   Itgb6i
Cdc42^AT1-KO
**

k
Mechanical signals
AT1   Integrin
ECM   TGF-β
CAP   TGFBR2
TGF-β signaling
CAP → miCAP

Figure 6

Extended Data Figure 1

Extended Data Figure 2

Extended Data Figure 3

Extended Data Figure 4

Extended Data Figure 5

Extended Data Figure 6

a CD45-, CD31+ lung cells:

Extended Data Figure 7

Extended Data Figure 8

a Ligation

CD45-, CD31+, TrkB- cells

EdU+ 11.8

CD45-, CD31+, TrkB+ cells

EdU+ 8.42

b Reversed

CD45-, CD31+, TrkB- cells

EdU+ 9.42

CD45-, CD31+, TrkB+ cells

EdU+ 17.9

c Cell proliferation

EdU+ endothelial cells (%)

NS
*
NS
**

Ctrl EC | Ligation | Reversed | Ligation | Reversed
TrkB- EC | miCAP

d Mouse: *Ntrk2^CreERT2; R26R^tdTomato*

Bronchial ligation
TAM
Day -14 -3 0
Left lung analyses

e miCAP trace TrkB ERG DAPI

Ligation

f CD45-, CD31+ cells:

TrkB+ 47.4

tdT+ 25.4

g CD45-, CD31+ cells:

tdT+ 16.1

TrkB+ 74.7

h miCAP trace TrkB ERG DAPI

Reversed

i miCAP-trace EC

TrkB+/Total traced EC (%)

****

Ligation | Reversed

Extended Data Figure 9

a CD45-, CD31+ cells in mouse lungs:

CAP1 trace

tdT+ 15.6

Sham — TrkB+ 2.97

Ligation — TrkB+ 62.1

CAP2 trace

tdT+ 7.21

Sham — TrkB+ 2.95

Ligation — TrkB+ 32.3

b CAP1 trace

Relative gene expression /Gapdh

● Ctrl ● Cdc42^{KO}

*** *

Cdc42   Ccn1   Ccn2   Ankrd1

CAP2 trace

Relative gene expression /Gapdh

● Ctrl ● Cdc42^{KO}

* * ** *

Cdc42   Ccn1   Ccn2   Ankrd1

c CD45-, CD31+, tdTomato+ cells in mouse lungs:

CAP1 trace

Ctrl — TrkB+ 22.9

Cdc42^{KO} — TrkB+ 21.7

CAP2 trace

Ctrl — TrkB+ 9.77

Cdc42^{KO} — TrkB+ 15.6

Extended Data Figure 10

a CD45- cells:

CD31- 49.3   CD31+ 48.4

EC

SSC / CD31

CD326+, YFP+ 6.66

AT1

YFP / CD326

b CD45-, CD31+ cells:

Ctrl

TrkB+ 30.8

SSC-A / TrkB

Tgfbr2^EC-KO

TrkB+ 10.5

SSC-A / TrkB

Extended Data Figure 11

a Adult mouse lung

b Adult human lung

Extended Data Figure 12