

## Supporting Information

### lymph node-targeted STING agonist nanovaccine against chronic HBV infection

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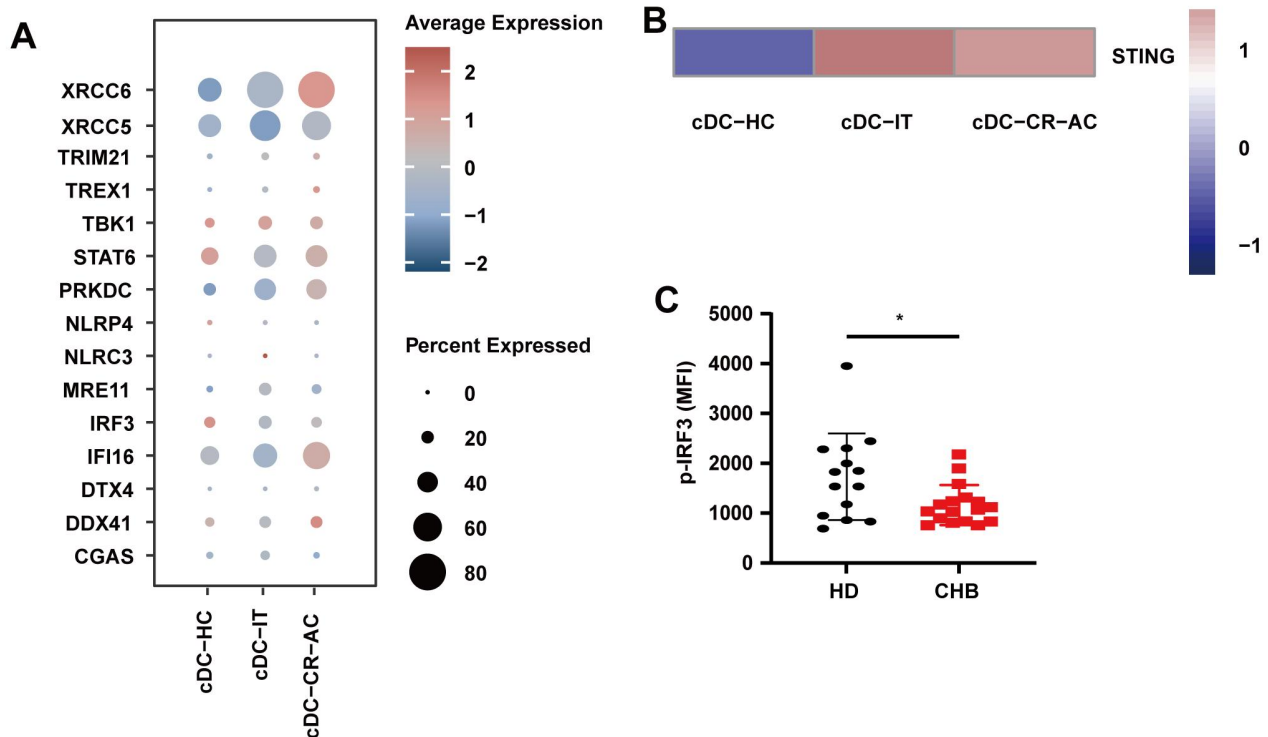
**Running title:** A STING nanovaccine against chronic HBV infection

**Supplementary Table 1. Demographic and baseline characteristics of patients with immune-tolerant chronic hepatitis B and healthy donors**

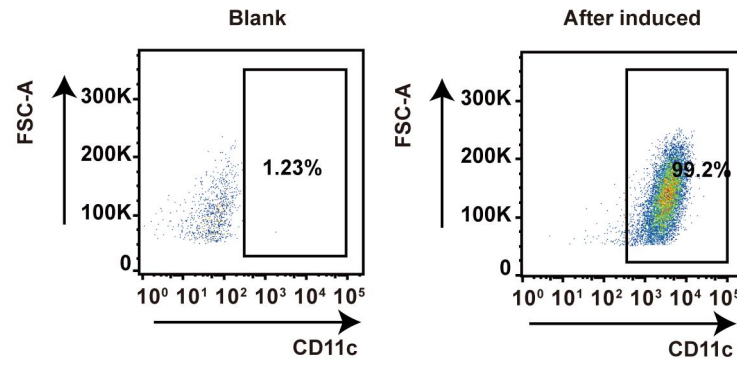
| Variables                        | CHB patients (n=17)  | Healthy donors (n=14) |
|----------------------------------|----------------------|-----------------------|
| Age, year                        | 35.72 $\pm$ 1.55     | 43.23 $\pm$ 2.67      |
| Gender, male(%)                  | 8 (47.06%)           | 7 (50%)               |
| ALT, IU/ml                       | 23.55 (17.00, 45.00) | 26.48 (15.00, 38.00)  |
| AST, IU/ml                       | 35.69 (29.00, 42.00) | 26.54 (18.00, 38.00)  |
| HBV DNA, log <sub>10</sub> IU/ml | 5.80 $\pm$ 0.17      | Negative              |
| HBsAg, log <sub>10</sub> IU/ml   | 4.88 $\pm$ 0.15      | Negative              |
| HBeAg, log <sub>10</sub> IU/ml   | 2.95 $\pm$ 0.34      | Negative              |

Normally distributed data are presented as the mean  $\pm$  SEM, and nonnormally distributed data are presented as the median (lower quartile, upper quartile). ALT, alanine transaminase; AST, aspartate aminotransferase; HBsAg, hepatitis B surface antigen; HBeAg, hepatitis B e antigen.

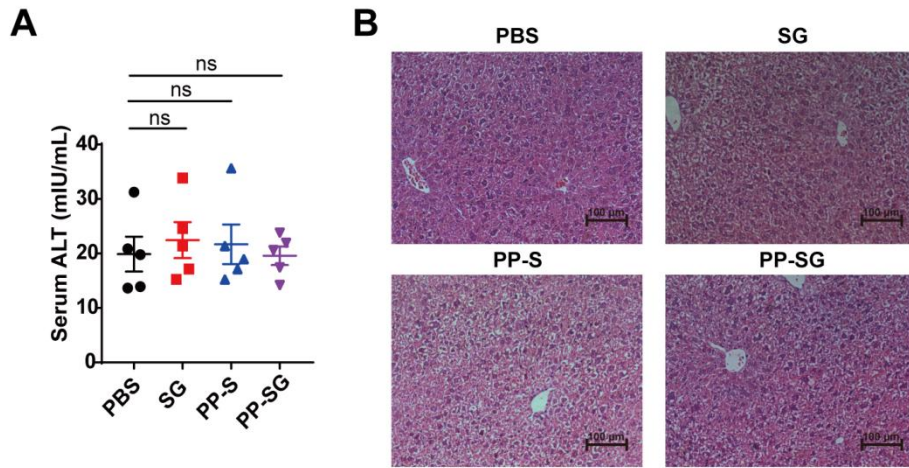
## Supplementary Figure:



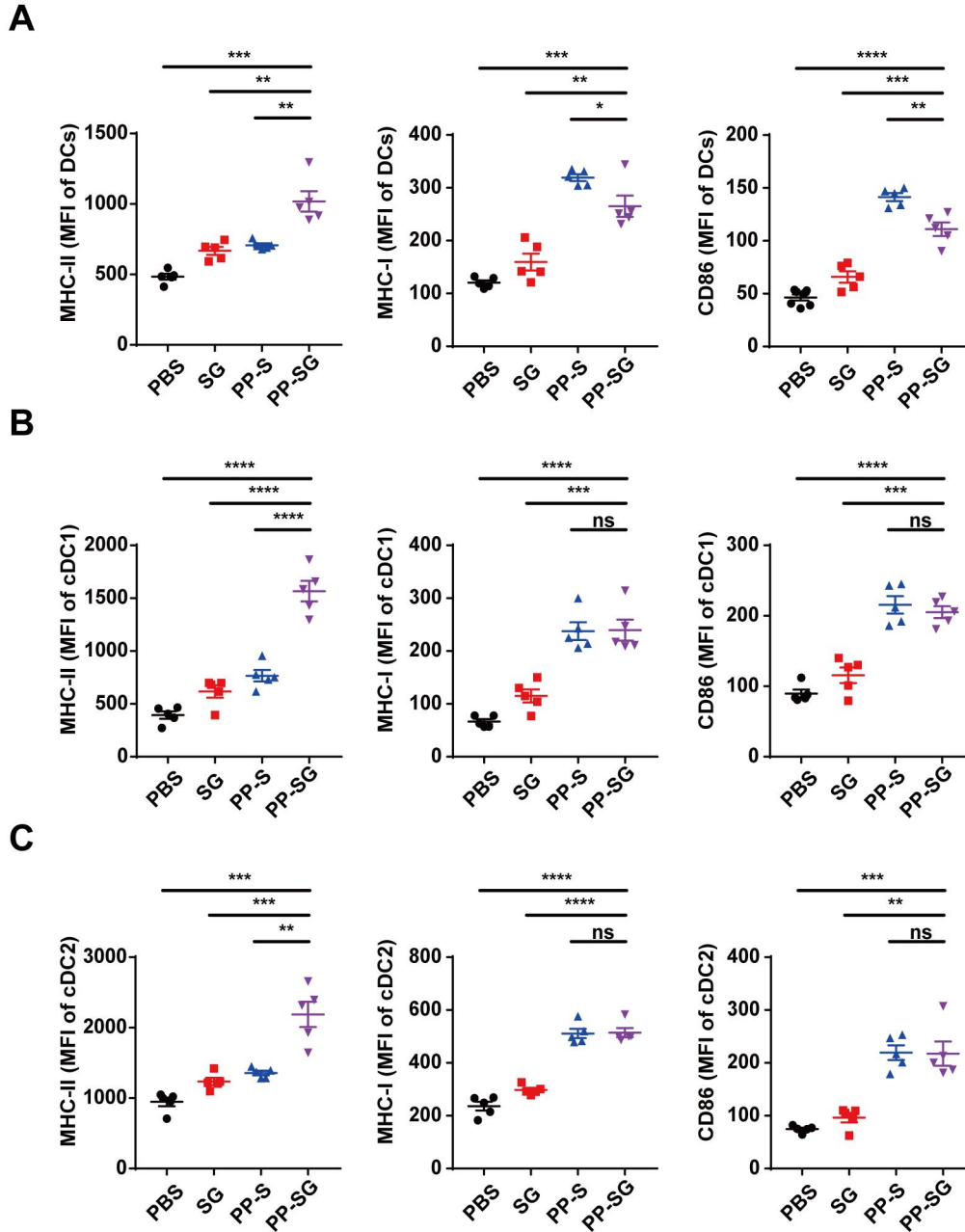
**Supplementary Figure 1. CHB infection impaired the STING-mediated induction of host immune responses signal pathway compared with HD group.** (A) Gene expression and (B) GSVA enrichment analysis associated with STING-mediated induction of host immune responses from GEO database (GSE182159). HC, healthy control; IT, immune tolerant (CHB); CR-AC, chronic resolved. (C) PBMCs were harvested from CHB patients and healthy donors (HDs) for flow cytometric analysis of p-IRF3 on CD11c<sup>+</sup> DCs. \* $p < 0.05$ , \*\* $p < 0.01$ , \*\*\* $p < 0.001$ , \*\*\*\* $p < 0.0001$ .



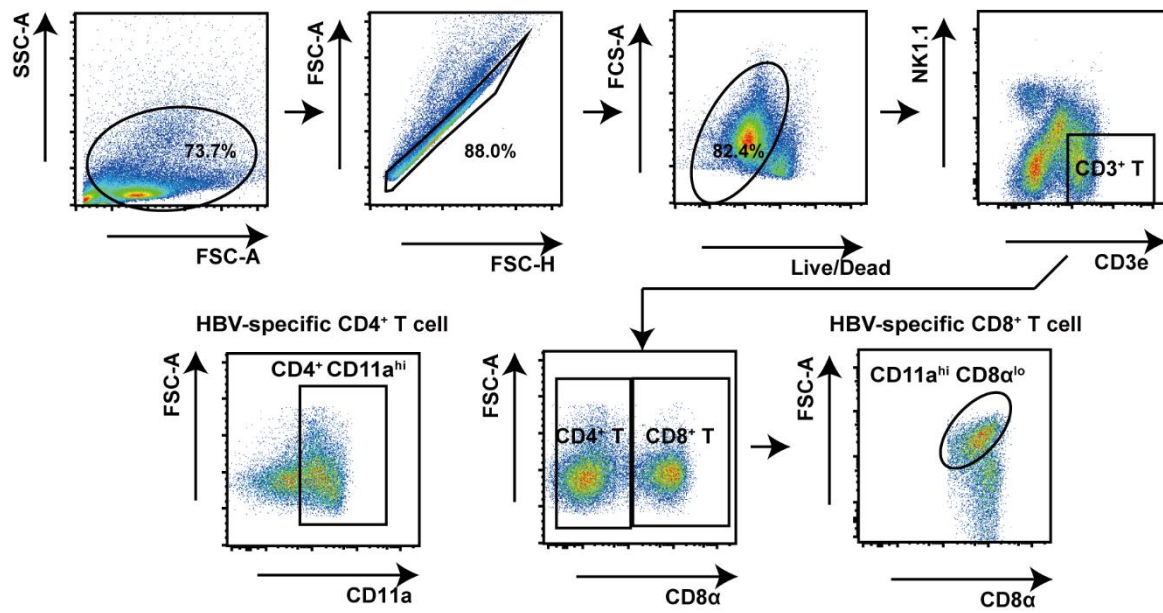
**Supplementary Figure 2. The generation of BMDC *in vitro*.** Murine bone marrow cells were stimulated with 10 ng/mL rmGM-CSF and 5 ng/mL rmIL-4 for 7 days *in vitro*. The percentage of CD11c<sup>+</sup> cells were analyzed by flow cytometry on day 7.



**Supplementary Figure 3. PP-SG nanovaccine safely eliminated HBV in HBV-carrier mice.** (A) Serum levels of ALT monitored on day 28 post-immunization. Serum ALT concentration below 40 mIU/mL was indicated physiologically normal. All data are expressed as mean  $\pm$  SEM from biological replicates. (B) H&E staining was analyzed at day 28 post-immunization. SG is a physical mixture of HBsAg and c-di-GMP; PP-S is a nanovaccine containing HBsAg; PP-SG is a nanovaccine containing HBsAg and c-di-GMP. \* $p < 0.05$ , \*\* $p < 0.01$ , \*\*\* $p < 0.001$ , \*\*\*\* $p < 0.0001$ .



**Supplementary Figure 4. PP-SG nanovaccine activated splenic DCs in HBV-carrier mice.** HBV-carrier mice treated with PBS or vaccines were re-challenged by 8  $\mu$ g pAAV/HBV 1.2 on day 59. The following analyses were performed on day 7 after the HBV re-challenge. The expression of MHC-II, MHC-I, and CD86 on splenic DCs (A), cDC1s (B), and cDC2s (C). SG is a physical mixture of HBsAg and c-di-GMP; PP-S is a nanovaccine containing HBsAg; PP-SG is a nanovaccine containing HBsAg and c-di-GMP. The data are presented as a mean  $\pm$  SEM ( $n \geq 5$ ). \* $p < 0.05$ , \*\* $p < 0.01$ , \*\*\* $p < 0.001$ , \*\*\*\* $p < 0.0001$ .



**Supplementary Figure 5. The gate strategy for CD8<sup>+</sup> T cell and CD4<sup>+</sup> T cells.** The strategy to gating CD8<sup>+</sup> T cells and CD4<sup>+</sup> T cells from mononuclear cells in liver.