

**EFFECT OF FLUID RESUSCITATION ON MORTALITY AND ORGAN FUNCTION IN
EXPERIMENTAL SEPSIS MODELS**

Additional data file #3

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Figure captions

Figure S1:

Comparison of complex I- and II-dependent hepatic mitochondrial respiration between the groups.

Top: Maximal hepatic mitochondrial complex I- and II-dependent respiration (state 3)

Middle: Resting hepatic mitochondrial complex I- and II-dependent respiration (state 4)

Bottom: Respiratory control ratio (RCR) for complex- I and II-dependent respiration.

Black (□) and open (o) circles represent non-survivors and survivors, respectively.

Statistics refers to: Univariate analysis of variance. Model refers to the effect of the model of sepsis.

Volume refers to the effect of volume strategy. Model x Volume refers to the interaction of the model and volume.

For complex I state 4 model effect $p=0.046$, post hoc test (independent t-test): $p=0.009$ between endotoxin and control groups (). Non-survivors had a lower complex II-dependent RCR ($p=0.01$, independent t-test).*

Figure S2:

Lactate/Pyruvate ratio (hepatic vein).

Statistics refers to: Repeated measures ANOVA. Time x Model refers to the effect of the model of sepsis in time. Time x Volume refers to the effect of volume strategy in time.

Time x Model x Volume refers to the interaction of the model and volume in time.

Figure S3:

Comparison of complex I- and II-dependent muscle mitochondrial respiration between the groups.

Top: Complex I-dependent maximal (state 3) and resting (state 4) muscle mitochondria respiration

Bottom: Complex II-dependent maximal (state 3) and resting (state 4) muscle mitochondria respiration

Black (□) and open (o) circles represent non-survivors and survivors, respectively.

Repeated measures ANOVA was used for the statistics. Time x Model refers to the effect of the model of sepsis in time. Time x Volume refers to the effect of volume strategy in time.

Time x Model x Volume refers to the interaction of the model and volume in time.

For complex I state 3 time x volume effect $p=0.04$, post hoc test (repeated measures ANOVA): $p=0.024$ between moderate and high-volume groups. Non-survivors had a tendency towards lower complex I- and II-dependent maximal respiration (state 3) ($p=0.09$ and $p=0.07$, respectively).

Figure S4:

Lung histology: colloid plaques (%).

Figure S5:

Lung histology: atelectasis (%).

Figure S6:

Liver histology, comparison between groups.

- A: Septation
- B: Pericentral dilatation of sinusoids
- C: Generalized dilatation of sinusoids
- D: Pericentral hepatocytes vacuolisation
- E: Generalized hepatocytes vacuolization
- F: Pericentral necrosis

Figure S1: Hepatic mitochondrial respiration

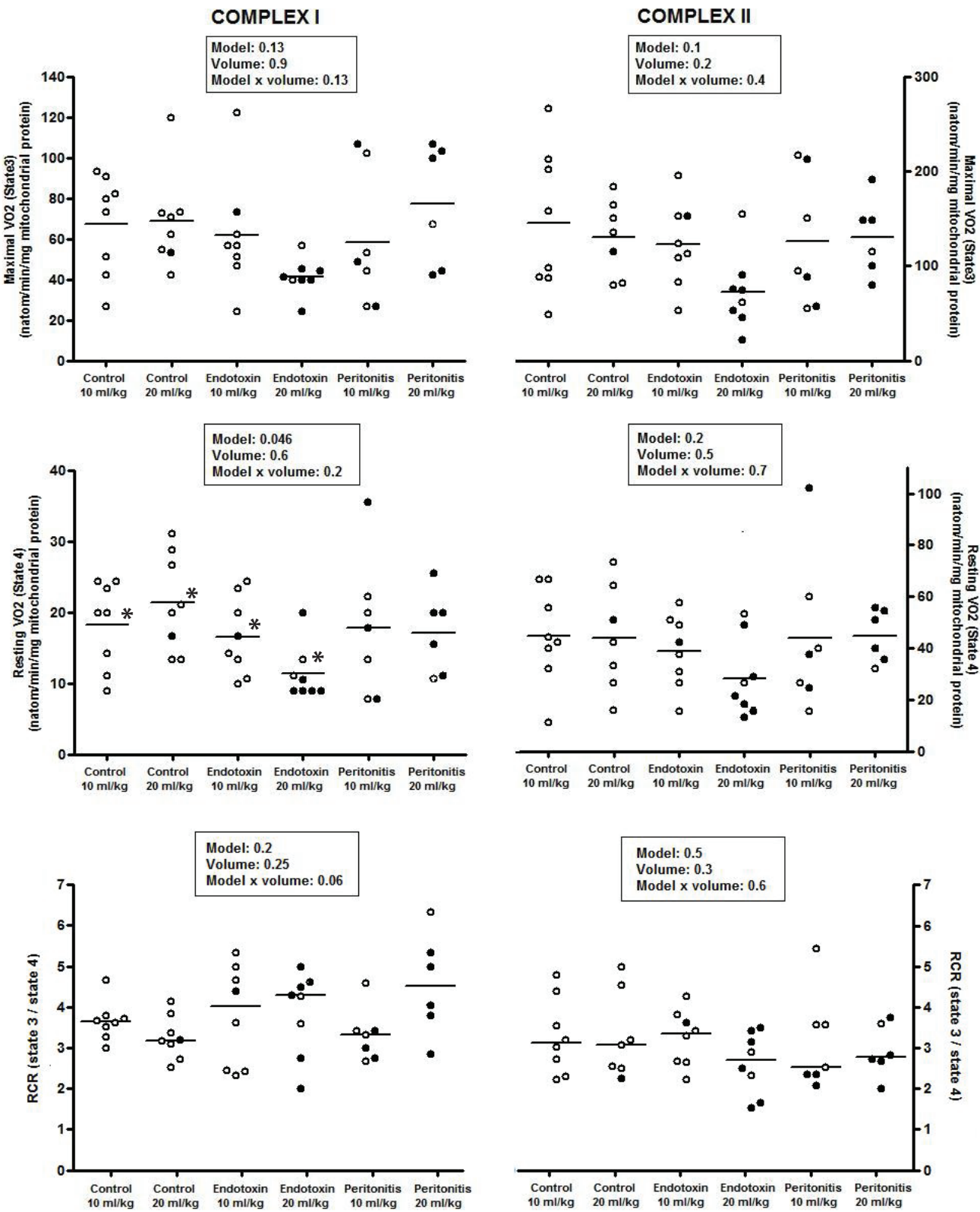


Figure S2: Lactate/Pyruvate ratio (hepatic vein)

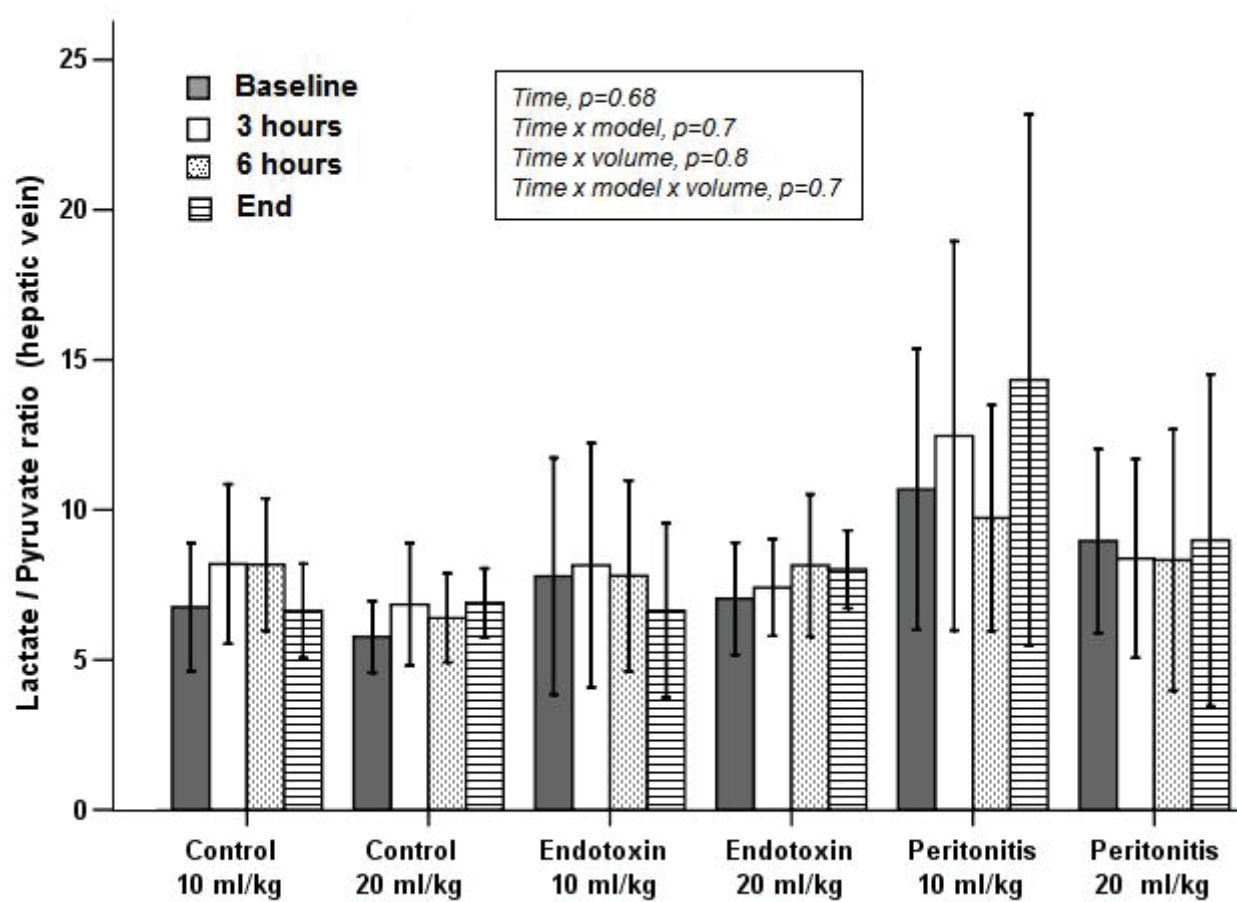


Figure S3: Muscle mitochondrial respiration

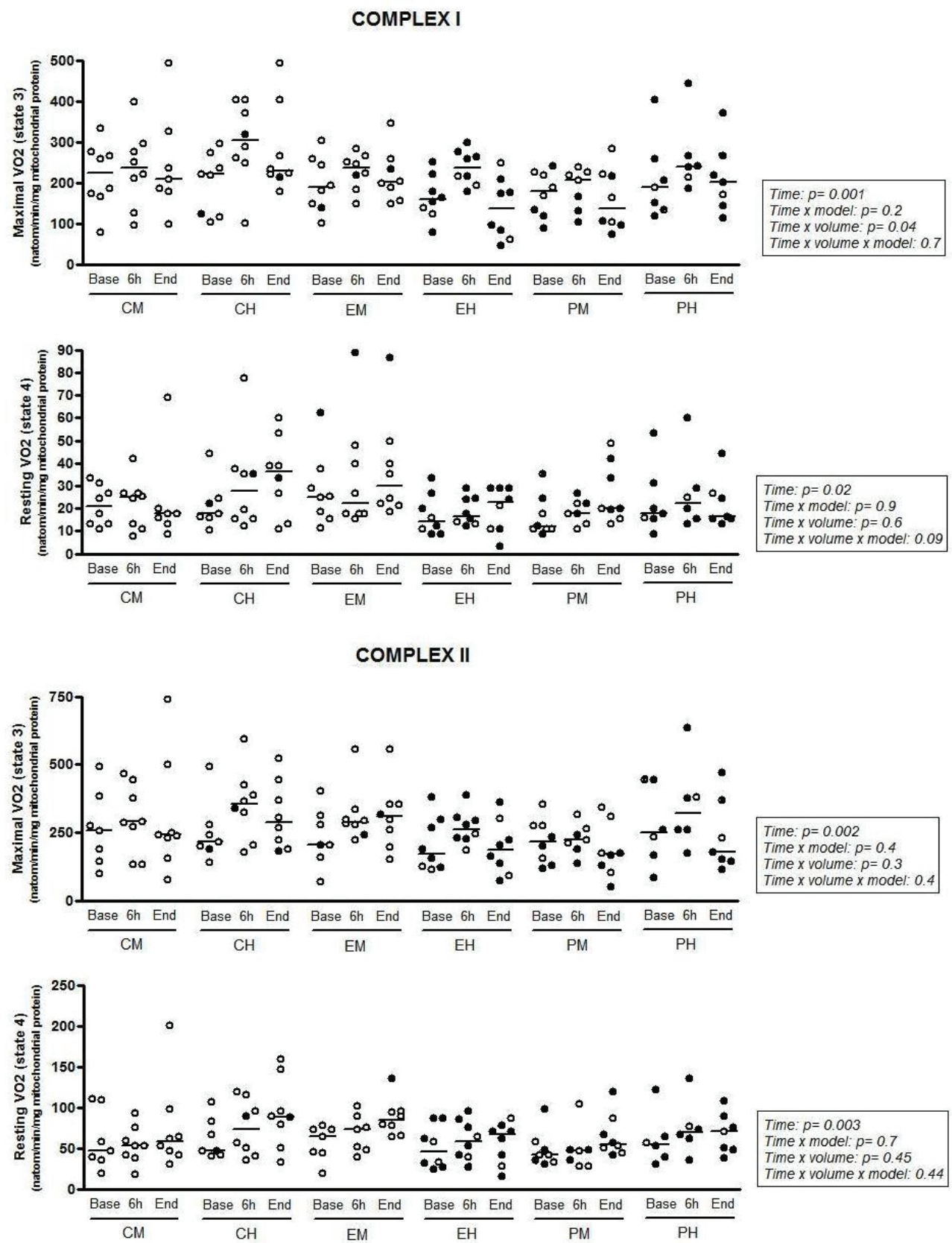


Figure S4 Percentage of colloid plaques (lung)

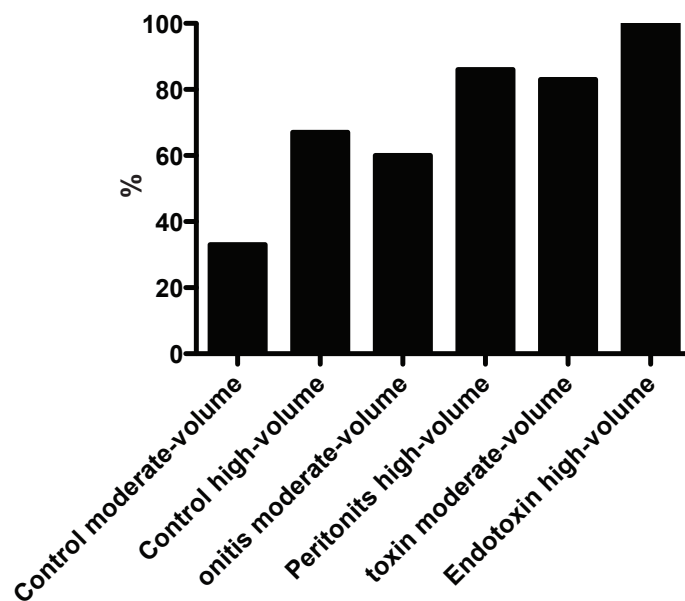


Figure S5 Percentage of atelectasis

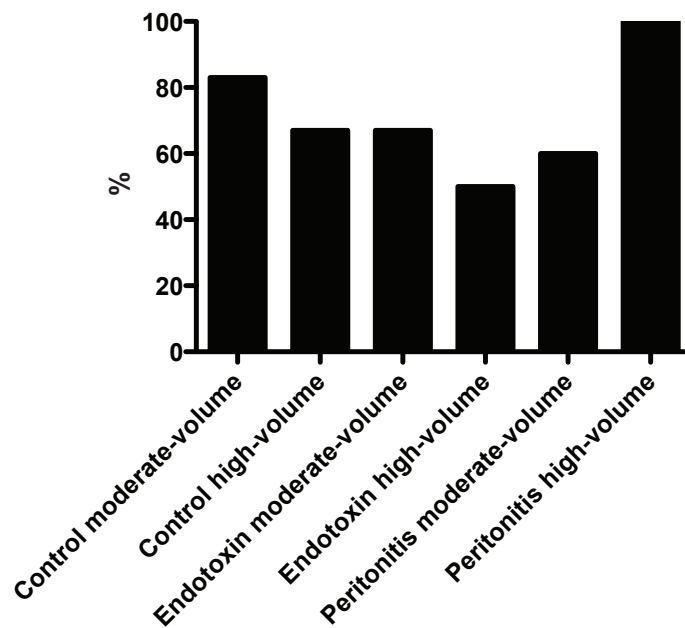


Figure S6 Liver histology

