#### SUPPLEMENTAL FIGURE LEGENDS

*Figure S1* Genetic or pharmacologic COX-2 inhibition led to increased kidney macrophage infiltration. Wild type or COX-2<sup>-/-</sup> mice (2 months old, C57/Bl6 background) were treated with a high salt diet (HS) for 4 weeks. (A) Kidney macrophage infiltration was markedly higher in HS plus SC58236-treated mice than in HS-treated mice, as indicated by immunostaining of F4/80, a marker of macrophages/dendritic cells (\*\*\* *P*<0.001, n = 4 in each group). (B) HS-treated COX-2<sup>-/-</sup> mice had more kidney macrophages compared to HS-treated wild type mice. Original magnification: x 160 in both A and B. All values are means  $\pm$  SEM. All *P* values were calculated by Student's *t* test.

*Figure S2* COX-2 inhibition led to increased M1 but decreased M2 markers *in vivo* and *in vitro*. (A) Kidney mRNA levels of M1/Th1 markers/cytokines including iNOS, CCL3, TNF- $\alpha$ , IL-1 $\alpha$  and IL-1 $\beta$  were markedly higher but that of mannose receptor (MR) were markedly lower in HS plus SC58236-treated mice than in mice with HS alone (\*\**P*<0.01 and \*\*\**P*<0.001, n = 4 in each group). (B) Freshly isolated peritoneal macrophages treated with 25  $\mu$ M SC58236 for 24 h had decreased protein levels of MR and arginase 1 (M2 markers) but increased protein levels of TNF-  $\alpha$  (M1 marker). All values are means  $\pm$  SEM. All *P* values were calculated by Student's *t* test.

*Figure S3* Mice with a deficient hematopoietic cell COX-2 pathway had increased heart hypertrophy in response to chronic high salt intake. (A) Heart weight vs. body weight ratios were higher in HS-treated COX-2<sup>-/-</sup>-WT BMT mice than in HS-treated WT-WT BMT mice (\*\*P<0.01, n = 4). (B) Heart weight vs. body weight ratios were also higher in HS-

treated CD11b-Cre;  $EP_4^{f/f}$  mice than in HS-treated  $EP_4^{f/f}$  mice (\*\*\**P*<0.001, n = 4). All values are means ± SEM. All *P* values were calculated by Student's *t* test.

*Figure S4* Prostaglandin EP<sub>4</sub> receptor tonically suppressed Th1 cytokine expression in cultured macrophages. (A) Murine macrophage RAW264.7 cells expressed COX-2, mPGES1 and VEGF-C. EP<sub>4</sub> was the major EP receptors in RAW264.7 cells. COX-1 and EP<sub>1</sub> receptor were undetectable. (B) Treatment of RAW264.7 cells with a selective EP<sub>4</sub> receptor antagonist, L-161,982 (20  $\mu$ M), led to increased mRNA levels of M1/Th1 markers/cytokines, including iNOS, IL-23 $\alpha$ , CCL3, TNF- $\alpha$ , IL-1 $\alpha$  and IL-6 (\*\*\**P*<0.001, n = 3). (C) PGE<sub>2</sub> led to inhibition of iNOS expression, which was prevented by the selective EP<sub>4</sub> receptor antagonist, L-161,982 (\*\*\**P*<0.001 vs. PGE<sub>2</sub> alone, n = 4 in each group). All values are means ± SEM. All *P* values were calculated by Student's *t* test.

*Figure S5* Macrophage EP<sub>4</sub> receptor was effectively deleted in CD11b-Cre; EP<sub>4</sub><sup>f/f</sup> mice. Peritoneal macrophages were isolated and EP<sub>4</sub> mRNA was quantitated by qPCR. Macrophage EP<sub>4</sub> mRNA levels were significantly lower in CD11b-Cre; EP<sub>4</sub><sup>f/f</sup> mice than in EP<sub>4</sub><sup>f/f</sup> mice (\*\**P*<0.01, n = 4). All values are means  $\pm$  SEM. All *P* values were calculated by Student's *t* test.

*Figure S6* The expression levels of p-NCC were increased in HS-treated mPGES-1<sup>-/-</sup>-WT BMT mouse than in HS-treated WT-WT BMT control.

*Figure S7* Increased medium NaCl elevated mRNA levels of COX-2 and NFAT5 and VEGF-C in cultured macrophage cells. (A) Addition of 40 mM NaCl to the medium increased RAW264.7 cell COX-2 and NFAT5 mRNA levels at 2.5 h and also increased VEGF-C mRNA levels at 5 h (\*P<0.05 and \*\*P<0.01 vs. control, n = 4 in each group). (B)

PGE<sub>2</sub> (100 nM) stimulated RAW264.7 cell NFAT5 mRNA expression (\*\*P<0.01, n = 4). All values are means ± SEM. All *P* values were calculated by Student's *t* test.

*Figure S8* COX-2<sup>-/-</sup>-COX-2<sup>-/-</sup> BMT mice had increased skin Na and K content and increased water content in response to high salt intake. (A) HS-treated COX-2<sup>-/-</sup>-COX-2<sup>-/-</sup> BMT mice had higher skin sodium and potassium content, compared to HS-treated WT-WT BMT mice (\*P<0.05, n = 4). (B) HS-treated COX-2<sup>-/-</sup> COX-2<sup>-/-</sup> BMT mice had higher skin water content, compared to HS-treated WT-WT BMT mice (\*P<0.05, n = 4). All values are means ± SEM. All *P* values were calculated by Student's *t* test.

*Figure S9* Renal ENaC mRNA levels were higher in HS-treated COX-2<sup>-/-</sup>-WT BMT and mPGES-1<sup>-/-</sup>-WT BMT mice than in HS-treated WT-WT BMT mice. Both ENaC $\beta$  and ENaC $\gamma$  mRNA levels were significantly higher in COX-2<sup>-/-</sup>-WT BMT and mPGES-1<sup>-/-</sup>-WT BMT mice than in WT-WT BMT mice in response to a high salt diet. (\**P*<0.05, n = 5 in each group). All values are means ± SEM. All *P* values were calculated by Student's *t* test.

*Figure S10.* Deficiency in hematopoietic cell COX-2 pathway had no effects on water and salt balance. Trained mice were given 1 mEq of NaCl via gastric gavage, and urine was collected every 12 h for next 72 h. (A and B) Both urine volume and sodium excretion were comparable between WT-WT and COX-2<sup>-/-</sup>-WT BMT mice (n = 4) (A) or between  $EP_4^{f/f}$ mice and CD11b-Cre;  $EP_4^{f/f}$  mice (n = 6) (B).

*Figure S11* Blood pressure was comparable between control COX-2<sup>-/-</sup>-WT BMT and WT-WT BMT Mice measured by tail-cuff microphonic manometer or carotid catheterization (n = 6 in each group).

Parameters	Na (mM)	K (mM)	CI (mM)	TCO <sub>2</sub> (mM)	BUN (mg/d	I) HCT (	%) Hgb (g/dl)
Control	148 ± 1	$5.5 \pm 0.7$	115 ±2	21 ± 1	21 ± 4	52 ± 2	17 ± 1
WT-WT	148 ± 1	$5.6 \pm 0.6$	117 ±2	22 ± 2	20 ± 1	50 ± 1	17 ± 1
COX-2 <sup>-/-</sup> -WT	148 ± 2	5.6 ± 1.2	116 ±2	25 ± 3	17 ± 3	48 ± 3	16 ± 1

Supplemental Table 1. Renal and Hematologic Parameters After BMT

Six weeks after BMT, renal and hematologic parameters were measured. Data were presented as mean  $\pm$  s.e.m (n = 3 in each group).







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**Supplemental Figure 5** 



p-NCC immunostaining: original magnification: x 250.



**Supplemental Figure 7** 



WT-WT COX-2<sup>-/-</sup>-COX-2<sup>-/-</sup>



**Supplemental Figure 9** 



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**Supplemental Figure 11**