Supplemental Figures



Supplemental Fig. 1. ERAP1 expression is increased in diabetic mice. (a) Body weight. (b) Epididymal white adipose tissue (eWAT) and subcutaneous white adipose tissue (sWAT) weight. (c) Fed blood glucose levels. (d) Serum tumor necrosis factor alpha (TNF- α) levels. (e) Serum interleukin 6 (IL-6) levels. (f) Gene expression of *Adamts14* and *Hapln4* in primary hepatocytes by RT-PCR. (g, i, and j) ADAMTS14, HAPLN4 or ERAP1 levels in the liver, serum, primary hepatocytes (cell lysate) or culture medium (CM) by western blotting (top or left) and quantified by densitometric analysis (bottom or right); A.U.: arbitrary unit. (h) Immunofluorescence staining for ERAP1 (green), DAPI (blue, indicating nucleus) and merge (white) in primary hepatocytes. Studies were conducted using 4-week-old male wild-type (WT) mice fed a

control diet (– HFD) or high-fat diet (+ HFD) for 16 weeks in (a–h). For (i), primary hepatocytes isolated from 10-week-old male WT mice were incubated with indicated concentration of interferon-gamma (IFN- γ) for 48 h. Studies were conducted using 10-week-old male WT (– *db/db*) or *db/db* (+ *db/db*) mice in (j). Data are expressed as the mean ± SEM (n = 4–6 per group, as indicated), with individual datapoints. * *p* < 0.05 for the effect of any group vs. control group.



Supplemental Fig. 2. Global knockout of *Erap1* improves systemic insulin sensitivity. (a) ERAP1 levels in the liver by western blotting (top) and quantified by densitometric analysis (bottom); A.U.: arbitrary unit. (b) Body weight. (c) Food intake.
(d) Tissue weight (eWAT: epididymal adipose tissue; sWAT: subcutaneous adipose tissue; BAT: brown adipose tissue). (e) Serum aspartate aminotransferase (AST) levels.
(f) Serum alanine aminotransferase (ALT) levels. (g) Serum triglyceride (TG) levels.

(h) Serum tumor necrosis factor alpha (TNF- α) levels. (i) Serum interleukin 6 (IL-6) levels. (j) Fed and fasting blood glucose levels. (k) Fed and fasting serum insulin levels. (l) Homeostatic model assessment of insulin resistance (HOMA-IR) index. (m) Glucose tolerance tests; AUC: area under the curve. (n) Insulin tolerance tests. Studies were conducted using 10-week-old wild-type (WT) or global *Erap1* knockout (KO) mice. Data are expressed as the mean \pm SEM (n = 3–10 mice per group, as indicated), with individual datapoints. * *p* < 0.05 for the effect of KO vs. WT.



Supplemental Fig. 3. Liver-specific knockdown of *Erap1* does not affect white adipose tissue (eWAT) or liver insulin sensitivity in high-fat diet (HFD) mice. (a and b) p-AKT, t-AKT, p-GSK3 β , and t-GSK3 β levels in the liver or eWAT by western blotting after insulin (+ Ins) stimulation (left) and quantified by densitometric analysis of the relative abundance of phosphorylated protein normalized to their total protein levels (right). Studies were conducted using 4-week-old male wild-type mice fed a control diet (- HFD) or high-fat diet (+ HFD) for 16 weeks and then injected with negative control adenovirus (- Ad-shERAP1) or adenovirus expressing small-hairpin RNA specific for mouse *Erap1* (+ Ad-shERAP1). Data are expressed as the mean ± SEM (n = 6–7 mice per group, as indicated), with individual datapoints. * p < 0.05 for the effect of + HFD vs. – HFD under – Ad-shERAP1 conditions; # p < 0.05 for the effect of + Ad-shERAP1 vs. – Ad-shERAP1 under + HFD conditions.



Supplemental Figure 4. Liver-specific knockdown of *Erap1* ameliorates insulin resistance in high-fat diet (HFD)-fed female mice. (a) Gene expression of *Erap1* in the liver by RT-PCR. (b) ERAP1 levels in the liver by western blotting (top) and quantified by densitometric analysis (bottom); A.U.: arbitrary unit. (c) Fed and fasting blood glucose levels. (d) Fed and fasting serum insulin levels. (e) Homeostatic model assessment of insulin resistance (HOMA-IR) index. (f) Glucose tolerance tests; AUC: area under the curve. (g) Insulin tolerance tests. (h) p-AKT, t-AKT, p-GSK3β, and t-GSK3β levels in the skeletal muscle (SM) by western blotting after insulin (+ Ins) stimulation (left) and quantified by densitometric analysis of the relative abundance of phosphorylated protein normalized to their total protein levels (right). Studies were conducted using 4-week-old female wild-type mice fed HFD for 9 weeks and then injected with negative control adenovirus (– Ad-shERAP1) or adenovirus expressing small-hairpin RNA specific for mouse *Erap1* (+ Ad-shERAP1). Data are expressed as the mean \pm SEM (n = 5–6 mice per group, as indicated), with individual datapoints. * p < 0.05 for the effect of + Ad-shERAP1 vs. – Ad-shERAP1.



Supplemental Fig. 5. Liver-specific knockdown of *Erap1* increases skeletal muscle (SM) insulin sensitivity in wild-type mice. (a) Gene expression of *Erap1* in the liver by RT-PCR. (b) ERAP1 levels in the liver by western blotting (top) and quantified by densitometric analysis (bottom); A.U.: arbitrary unit. (c) Body weight. (d) Food intake.
(e) Tissue weight (eWAT: epididymal adipose tissue; sWAT: subcutaneous adipose tissue; BAT: brown adipose tissue). (f) Serum aspartate aminotransferase (AST) levels.
(g) Serum alanine aminotransferase (ALT) levels. (h) Serum triglyceride (TG) levels.
(i) Fed and fasting blood glucose levels. (j) Fed and fasting serum insulin levels. (k)

Homeostatic model assessment of insulin resistance (HOMA-IR) index. (I) Glucose tolerance tests; AUC: area under the curve. (m) Insulin tolerance tests (0.5 U/kg). (n) p-AKT, t-AKT, p-GSK3 β , and t-GSK3 β levels in the SM by western blotting before (– Ins) or after insulin (+ Ins) stimulation (left) and quantified by densitometric analysis of the relative abundance of phosphorylated protein normalized to their total protein levels (right). Studies were conducted using 10-week-old male wild-type mice injected with negative control adenovirus (– Ad-shERAP1) or adenovirus expressing small-hairpin RNA specific for mouse *Erap1* (+ Ad-shERAP1). Data are expressed as the mean ± SEM (n = 6–7 mice per group, as indicated), with individual datapoints. * *p* < 0.05 for the effect of + Ad-shERAP1 vs. – Ad-shERAP1.



Supplemental Fig. 6. Liver-specific knockdown of *Erap1* ameliorates skeletal muscle (SM) insulin sensitivity in *db/db* mice. (a) Gene expression of *Erap1* in the liver by RT-PCR. (b) ERAP1 levels in the liver by western blotting (top) and quantified by densitometric analysis (bottom); A.U.: arbitrary unit. (c) Fed and fasting blood

glucose levels. (d) Fed and fasting serum insulin levels. (e) Homeostatic model assessment of insulin resistance (HOMA-IR) index. (f) Glucose tolerance tests; AUC: area under the curve. (g) Insulin tolerance tests. (h) p-AKT, t-AKT, p-GSK3 β , and t-GSK3 β levels in the SM by western blotting before (– Ins) or after (+ Ins) insulin stimulation (left) and quantified by densitometric analysis of the relative abundance of phosphorylated protein normalized to their total protein levels (right). Studies were conducted using 10-week-old male *db/db* mice injected with negative control adenovirus (– Ad-shERAP1) or adenovirus expressing small-hairpin RNA specific for mouse *Erap1* (+ Ad-shERAP1). Data are expressed as the mean ± SEM (n = 6–7 mice per group, as indicated), with individual datapoints. * *p* < 0.05 for the effect of + Ad-shERAP1 vs. – Ad-shERAP1.



Supplemental Fig. 7. Liver-specific *Erap1* overexpression does not affect epididymal white adipose tissue (eWAT) or liver insulin sensitivity. (a) Gene

expression of *Albumin (Alb)*, adhesion G protein-coupled receptor E1 (*Adgre1*), or *Erap1* in primary hepatocytes (PH) or non-hepatocytes (non-PH) by RT-PCR. (b) Body weight. (c) Food intake. (d) Tissue weight (sWAT: subcutaneous adipose tissue; BAT: brown adipose tissue). (e) Serum aspartate aminotransferase (AST) levels. (f) Serum alanine aminotransferase (ALT) levels. (g) Serum triglyceride (TG) levels. (h and i) p-AKT, t-AKT, p-GSK3β, and t-GSK3β levels in the liver or eWAT by western blotting before (– Ins) or after (+ Ins) insulin stimulation (left) and quantified by densitometric analysis of the relative abundance of phosphorylated protein normalized to their total protein levels (right). Studies were conducted using 10-week-old male wild-type mice injected with adenovirus expressing green fluorescent protein (– Ad-ERAP1) or *Erap1* (+ Ad-ERAP1). Data are expressed as the mean \pm SEM (n =3–6 mice per group, as indicated), with individual datapoints. * *p* < 0.05 for the effect of any group vs. control group.



Supplemental Figure 8. Adeno-associated virus mediated overexpression of ERAP1 in the liver impairs skeletal muscle (SM) insulin sensitivity. (a) Gene expression of *Erap1* in the liver by RT-PCR. (b) ERAP1 levels in the liver by western blotting (top) and quantified by densitometric analysis (bottom); A.U.: arbitrary unit. (c) Fed and fasting blood glucose levels. (d) Fed and fasting serum insulin levels. (e) Homeostatic model assessment of insulin resistance (HOMA-IR) index. (f) Glucose tolerance tests; AUC: area under the curve. (g) Insulin tolerance tests. (h) p-AKT, t-AKT, p-GSK3β, and t-GSK3β levels in the SM by western blotting before (- Ins) or after (+ Ins) insulin stimulation in the SM (left) and quantified by densitometric analysis of the relative abundance of phosphorylated protein normalized to their total protein levels (right). Studies were conducted using 10-week-old male wild-type mice injected with AAV8-TBG-GFP (- AAV-TBG-ERAP1) or AAV8-TBG-ERAP1 (+ AAV-TBG-ERAP1). Data are expressed as the mean \pm SEM (n = 5–7 mice per group, as indicated), with individual datapoints. * p < 0.05 for the effect of + AAV-TBG-ERAP1 vs. – AAV-TBG-ERAP1.



Supplemental Fig. 9. ERAP1 does not affect insulin sensitivity in hepatocytes or adipocytes. (a) ERAP1 levels in epididymal white adipose tissue (eWAT), skeletal muscle (SM), or brown adipose tissue (BAT) by western blotting (left) and quantified by densitometric analysis (right); A.U.: arbitrary unit. (b and c) p-AKT, t-AKT, p-GSK3β, and t-GSK3β levels in primary hepatocytes or C3H10T1/2 adipocytes by western blotting after insulin stimulation (left) and quantified by densitometric analysis of the relative abundance of phosphorylated protein normalized to their total protein levels (right). (d and e) Insulin stimulated 2-NBDG uptake in primary hepatocytes or C3H10T1/2 adipocytes. Studies for (a) were conducted using 10-week-old male wild-type mice injected with adenovirus expressing green fluorescent protein (-Ad-ERAP1) or Erap1 (+ Ad-ERAP1). Cells were incubated with indicated concertation of recombinant mouse ERAP1 (rmERAP1) (b-e) for 20 min, with 100 nM insulin (+ Ins) stimulation for 20 min at the same time. Data are expressed as the mean \pm SEM (n = 3–6 per group, as indicated), with individual datapoints. * p < 0.05 for the effect of any group vs. control group.



Supplemental Fig. 10. Inhibition of β 2 adrenergic receptor (ADRB2) specifically inhibits skeletal muscle insulin signaling *in vitro*. (a–c) p-AKT, t-AKT, p-GSK3 β , t-GSK3 β , ADRB2, and p-PKA substrate levels by western blotting after insulin stimulation (top) and quantified by densitometric analysis (bottom); A.U.: arbitrary unit. *C2C12* myotubes (a), primary hepatocytes (b), or *C3H10T1/2* adipocytes (c) were incubated with indicated concentration of ICI118,551 for 6 h, followed by 100 nM insulin stimulation for 20 min. Data are expressed as the mean ± SEM (n = 4–6 per group, as indicated), with individual datapoints. * *p* < 0.05 for the effect of any group vs. control group.



Supplemental Fig. 11. ERAP1 neutralizing antibodies have no effect on epididymal white adipose tissue (eWAT) or liver insulin sensitivity. (a) ERAP1 levels in conditioned medium by western blotting (top) and quantified by densitometric analysis (bottom); A.U.: arbitrary unit. (b and c) Leucine aminopeptidase activity. (d and e) p-AKT, t-AKT, p-GSK3β, and t-GSK3β levels in the liver or eWAT after insulin (+ Ins) stimulation (left) and quantified by densitometric analysis of the relative abundance of phosphorylated protein normalized to their total protein levels (right). HepG2 cells were infected with adenovirus expressing green fluorescent protein (-Ad-ERAP1) or Erap1 (+ Ad-ERAP1). - Ad-ERAP1 infected conditioned medium (-CM-ERAP1) or + Ad-ERAP1 infected high-ERAP1 conditioned medium (+ CM-ERAP1) were collected 48 h later in (a). For (b), - CM-ERAP1 or + CM-ERAP1 incubated with 12 µg/mL anti-IgG antibodies (- anti-ERAP1) or anti-ERAP1 antibodies (+ anti-ERAP1) were detected for leucine aminopeptidase activity. For (c-e), 4-week-old male wild-type mice were fed a control diet (- HFD) or high-fat diet (+ HFD) for 16 weeks and then intraperitoneally injected with 1 mg/kg - anti-ERAP1

or + anti-ERAP1. Data are expressed as the mean \pm SEM (n = 3–4 per group, as indicated), with individual datapoints. * p < 0.05 for the effect of any group vs. control group; #p < 0.05 for the effect of + anti-ERAP1 vs. – anti-ERAP1 under + CM-ERAP1 conditions in (b).



Supplemental Fig. 12. ERAP1 does not affect β 1 adrenergic receptor (ADRB1) and β 3 adrenergic receptor (ADRB3) levels in skeletal muscle (SM). (a) Gene expression of *Adrb2*, *Adrb1*, and *Adrb3* levels in the SM. (b) ADRB1 and ADRB3 levels in the SM by western blotting (left) and quantified by densitometric analysis (right); A.U.: arbitrary unit. Studies were conducted using 10-week-old male wild-type mice injected with adenovirus expressing green fluorescent protein (– Ad-ERAP1) or *Erap1* (+ Ad-ERAP1). Data are expressed as the mean ± SEM (n = 4–6 mice per group, as indicated), with individual datapoints. * *p* < 0.05 for the effect of + Ad-ERAP1 vs. – Ad-ERAP1.



Supplemental Fig. 13. ERAP1 does not affect the interaction between neural precursor cell expressed, developmentally downregulated 4 (NEDD4) or ubiquitin specific peptidase 20 (USP20) with β 2 adrenergic receptor (ADRB2). (a) The effect of ERAP1 on the interaction between ADRB2 and NEDD4; (b) The effect of ERAP1 on the interaction between ADRB2 and USP20. (c and d) p-AKT, t-AKT, p-GSK3 β , t-GSK3 β , ADRB2, and p-PKA substrate levels in *C2C12* myotubes (left) and quantified by densitometric analysis (right); A.U.: arbitrary unit. Studies for (a and b) were conducted using *293T* cells transfected with indicated plasmids for 24 h and treated with (+ rmERAP1) or without (- rmERAP1) 500 ng/mL recombinant mouse ERAP1 (rmERAP1) for 2 h and stimulated with 10 μ M isoprenaline (Iso) for 30 min. Then, cells were immunoprecipitated (IP) with anti-FLAG antibodies, followed by immunoblotting (IB) with indicated antibodies in (a and b). Studies for (c) were conducted using *C2C12* myotubes infected with adenovirus expressing control green fluorescent protein (- Ad-ADRB2), or *Adrb2* (+ Ad-ADRB2) for 48 h and then

stimulated with or without 500 ng/mL rmERAP1 for 2h. Studies for (d) were conducted using *C2C12* myotubes treated with (+ forskolin) or without (- forskolin) 100 μ M forskolin for 24 h and stimulated with or without 500 ng/mL rmERAP1 for 20 min, with 100 nM insulin (+ Ins) stimulation for 20 min at the same time. Data are expressed as the mean ± SEM (n = 5–6 per group, as indicated), with individual datapoints. * *p* < 0.05 for the effect of any group vs. control group. # *p* < 0.05 for the effect of + Ad-ADRB2 vs. – Ad-ADRB2, or + forskolin vs. – forskolin under + rmERAP1 conditions.

Supplemental Table 1. Antibodies for western blotting.

Antibodies	Company	Cat No.	Dilution
Phospho-AKT (Ser 473)	Cell Signaling Technology	9271S	1:1000
AKT	Cell Signaling Technology	9272S	1:1000
Phospho-GSK3β (Ser 9)	Cell Signaling Technology	9336S	1:1000
GSK3β	Cell Signaling Technology	9315S	1:1000
Phospho-PKA substrates	Cell Signaling Technology	96218	1:1000
ERAP1	Abcam (for WB)	ab124669	1:1000
ERAP1	Santa Cruz Biotechnology (for	sc-271823	1:50
	IF)		
ADRB2	Proteintech (for WB)	13096-1-AP	1:1000
ADRB2	Norvus (for IP)	NBP2-67187	1:200
USP33	Proteintech	20445-1-AP	1:1000
USP20	Proteintech	17491-1-AP	1:1000
NEDD4	Proteintech	21698-1-AP	1:1000
HAPLN4	Proteintech	21228-1-AP	1:1000
β-actin	Proteintech	66009-1-Ig	1:5000
α-tubulin	Sigma–Aldrich	T6199	1:5000

НА	Sigma–Aldrich	H96582ML	1:500
FLAG	Sigma–Aldrich	F3165	1:500
ADRB1	Sigma–Aldrich	SAB2100064-50UG	1:1000
ADRB3	Signalway Antibody	40617-1	1:1000
MYC	Santa Cruz Biotechnology	sc-40	1:500
ADAMTS14	Invitrogen	PA5-103578	1:1000

Supplemental Table 2. RT-PCR primers.

Genes	Forward primer (5'-3')	Reverse primer (5'-3')
Erap1	GGCGGCTGTGATGAAGGTAA	TCCCCAGAAAGTCAGAGTGC
Gapdh	TGTGTCCGTCGTGGATCTGA	CCTGCTTCACCACCTTCTTGAT
Actin	CAACGAGCGGTTCCGATG	GCCACAGGATTCCATACCCA
Adamts14	TTTCGGGAACTCTTCCGACAA	CCAATCCATCACAGTTGCTGA
Hapln4	CCCTTTGGCTTTCGCCGAT	CCCCAGGTCCGTCATTCTG
Adrb1	GCATTGAGACCCTGTGTGTCA	AGCAAACTCTGGTAGCGAAAGG
Adrb2	CCACCCACAAGAAAGCTATCG	GGCCTGGTTCGTGAAGAAGTC
Adrb3	ACGCCGAGACTACAGACCATA	CTGGTGGCATTACGAGGA
Albumin	AGAAGACACCCTGATTACTCT	TCGAGAAGCAGGTGTCCTTGT
Adgre1	TITCCTCGCCTGCTTCTTC	CCCCGTCTCTGTATTCAACC

Supplemental data 1. NCD vs HFD differentially expressed genes and proteins.