Supplemental data

Figure S1

COX-2 expression increased in the stroma and epithelia in some human colonic adenomas. Original magnification: x 25 (left panel) and x 250 (right panel).

Figure S2

11βHSD2 activity in CT26 cells was inhibited by GA or 11βHSD2 knockdown. (**A**) 11βHSD2 knockdown was more potent than GA (10 μM) in inhibition of 11βHSD2 activity (**P*<0.01 versus vehicle, †*P*<0.01 versus CT26 plus GA, *n* = 4). (**B**) Representative immunoblots indicating that corticosterone (CS)-induced COX-2 inhibition in CT26 cells was augmented by 11βHSD2 knockdown. 10 nM CS in 11βHSD2 knockdown CT26^{shRNA3-31} cells was as effective as 1,000 to 10,000 nM CS in parental CT26 cells to inhibit COX-2 expression. Also included is densitometric quantification of COX-2 immunoreactive protein in response to CS administration, normalized to ß actin expression and represented as fold of expression of control cells (n=2).

Figure S3

11βHSD2 inhibition enhanced corticosterone (CS)-induced inhibition of cell migration. (**A**) 11βHSD2 knockdown enhanced low dose CS (10 nM)-induced inhibition of CT26 cell migration (**P*<0.0001, *n* = 3). (**B**) GA treatment enhanced CS (10 nM)-induced inhibition of CT26 cell migration (**P*<0.0001 versus GA group, †*P*<0.0001 versus CS group, *n* = 3).

GA treatment inhibited CT26 tumor growth. (**A**) GA dose-dependently inhibited CT26 tumor growth. Tumor growth in the vehicle treated group was taken as 100%. *P < 0.01 versus vehicle, **P < 0.0001 versus vehicle (n = 6). (**B**) GA treatment did not further inhibit CT26 tumor growth in the presence of COX-2 inhibition (SC-58236, 2 mg/kg/day, i.p.). *P < 0.0001, n = 5.

Figure S5

GA was efficiently converted to its metabolite glycyrrhetinic acid (GE) in mice. Mice were sacrificed 24 h after last GA i.p. injection and tissues were dissected and stored at - 80° C. Tissue GA and GE levels were determined using LC-MS/MS. GA levels were 162 ± 79, 170 ± 89, and 402 ± 96 ng/g while GE levels were 1093 ± 309, 2958 ± 1206, and 1108 ± 206 ng/g, respectively, in kidney, colon and CT26 tumors (*n* = 4 in each group).

Figure S6

Inhibition of 11 β HSD2 activity with GA suppressed human colon carcinoma HCA-7 tumor growth. (**A**) Human colon carcinoma HT-29 cells and HCA-7 cells expressed similar levels of 11 β HSD2, but HT-29 cells expressed significantly lower levels of COX-2 than HCA-7 cells. Protein lysates from HCA-7 and HT-29 cells were transferred and the same immunoblot was successively probed for COX-2, 11 β HSD2 and β -actin. (**B**) Selective COX-2 inhibition with SC-58236 or NS-398 inhibited HCA-7 but not HT-29 cell proliferation (**P*<0.01 vs. vehicle, *n* = 6 in each group). (**C**) GA treatment (10 mg/kg/day, i.p.) had no effect on HT-29-derived tumor growth in athymic nude mice. *P* = 0.4766, *n* = 6. (**D**) GA inhibited HCA-7-derived tumor growth (**P*<0.01, *n* = 6), COX-2 and mPGES-1 expression (original magnification: x 400).

Inhibition of 11 β HSD2 activity with GA suppressed vascularization in CT-26 tumors. (**A**) GA reduced CT26 tumor VEGF expression (**P*<0.0001, *n* = 6). (**B**) GA reduced CT26 tumor vascular density (green=CD31 immunofluorescent staining, blue=DAPI staining) (original magnification: x160).

Figure S8

Long-term GA treatment did not inhibit PGI₂ production or promote atherogenesis. (**A**) GA treatment (3 to 30 mg/kg/day, i.p.) for 4 weeks trended to increase urinary excretion of the major murine PGI₂ metabolite 2,3-dinor-6-keto PGF_{1α} (PGI-M) and had no effect on excretion of the thromboxane metabolite, 2,3-dinor TxB₂ (Tx-M). *: *P*<0.05 versus vehicle, n = 6. (**B**) GA treatment (10 mg/kg/day, i.p.) for 10 weeks had no effect on the development of atherosclerosis (n = 4). (left) Atherosclerotic lesion size in the proximal aorta; (right) lesion percentage of en *face* aorta.





Figure S2



Figure S3







Α





D











Figure S6



Figure S7



GA dose (mg/kg/day)









Figure S8