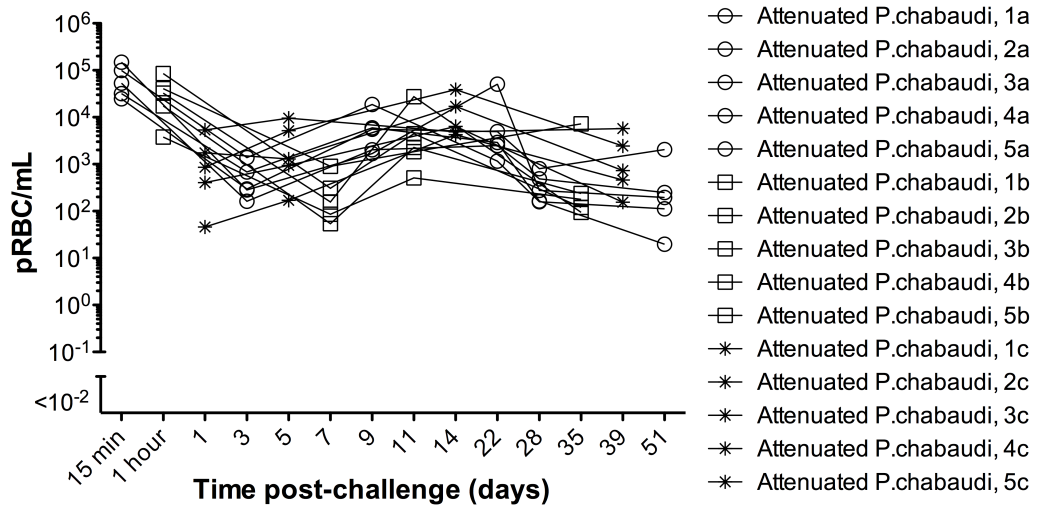
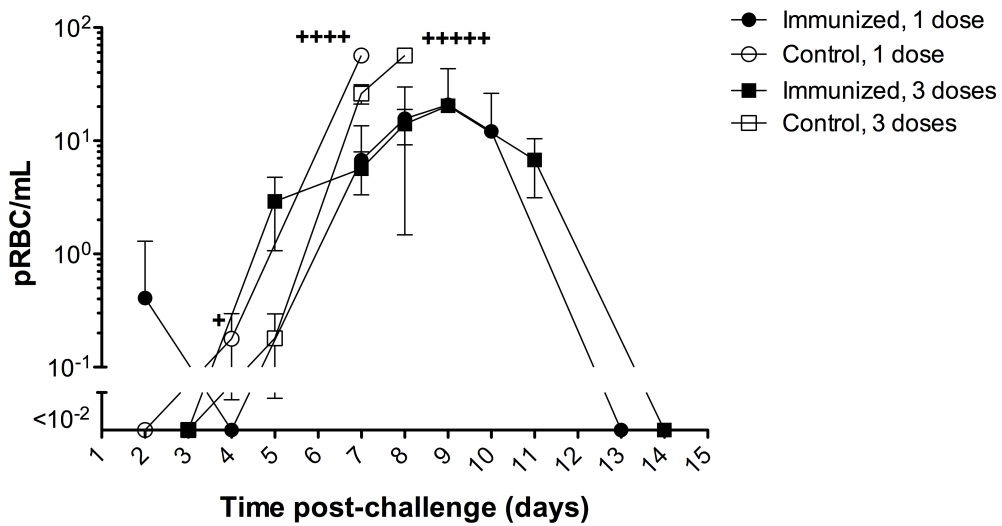


Supp. Fig 1



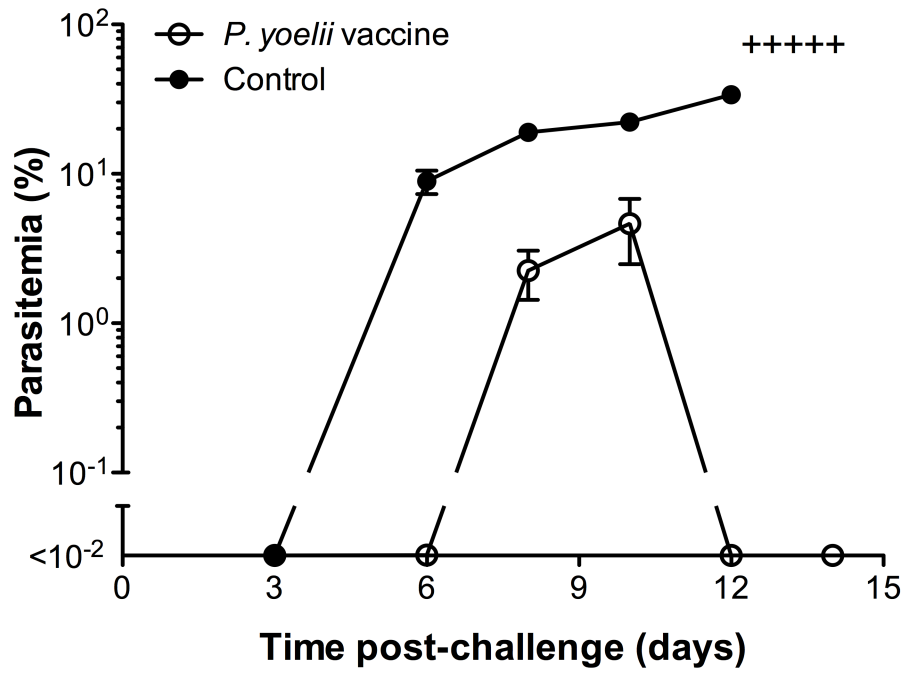
**Supp. Figure 1.** *Monitoring attenuated parasites by qPCR.* (a) 15 immunodeficient SCID mice were administered  $10^6$  *P. chabaudi* pRBC attenuated with 2  $\mu$ M centanamycin. 50ul of blood was collected from groups of 5 mice at each time point and qPCR performed to estimate parasite density. The 3 groups were bled every third timepoint to prevent anemia from repeated bleeding. Y-axes show the estimated parasite density.

Supp. Fig 2



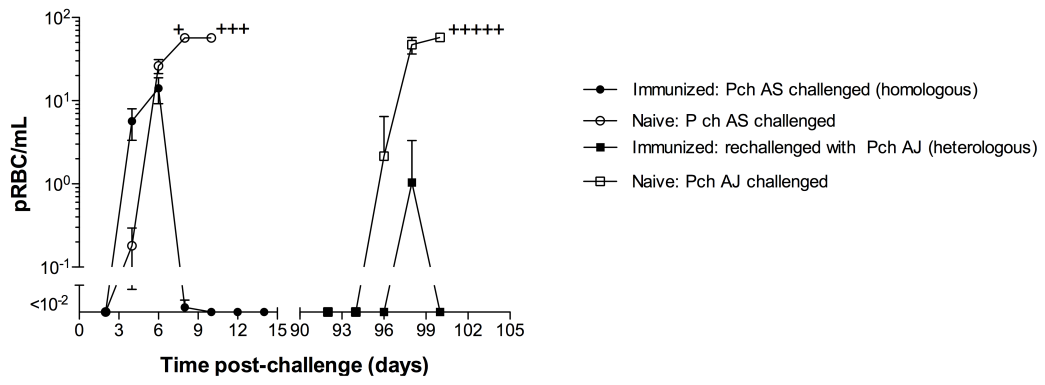
**Supp. Figure 2.** *Comparison of 1 dose vs 3 doses of vaccine.* (a) Cohorts of five A/J mice were vaccinated with a single dose or three doses of  $10^6$  *P. chabaudi* pRBC attenuated with centanamycin. All mice were challenged 5 weeks post the first dose (two weeks post 3<sup>rd</sup> dose in thrice immunized mice). '+' indicates that a mouse succumbed to the infection.

Supp. Fig 3



**Supp. Figure 3.** *Vaccine immunity is long-lived.* (a) Five A/J mice were vaccinated with a single dose of  $10^6$  *P. yoelii* pRBC attenuated with centanamycin or left naive. All mice were challenged 6 months post vaccination. '+' indicates that a mouse succumbed to the infection.

Supp. Fig 4

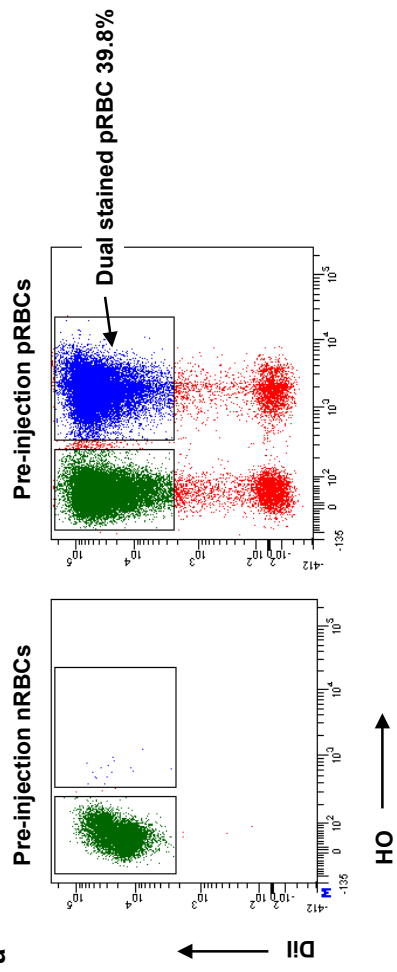


**Supp. Figure 4.** *Vaccine immunity protects against homologous and heterologous parasites.* (a) A/J mice were vaccinated with a single dose of  $10^6$  *P. chabaudi* AS pRBC attenuated with centanamycin (5 mice) or left naïve (4 mice). Mice were challenged with homologous parasite, *P. chabaudi* AS. Three months later immunized mice were re-challenged with heterologous strain *P. chabaudi* AJ and naïve mice also challenged with *P. chabaudi* AJ. '+' indicates that a mouse succumbed to the infection.

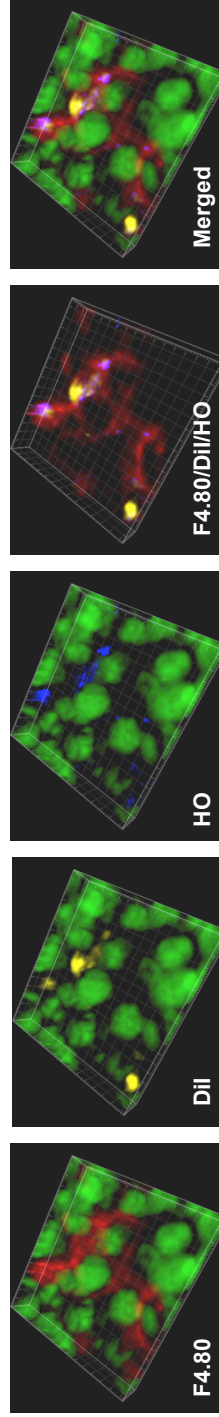


Supp. Fig 5

**a**

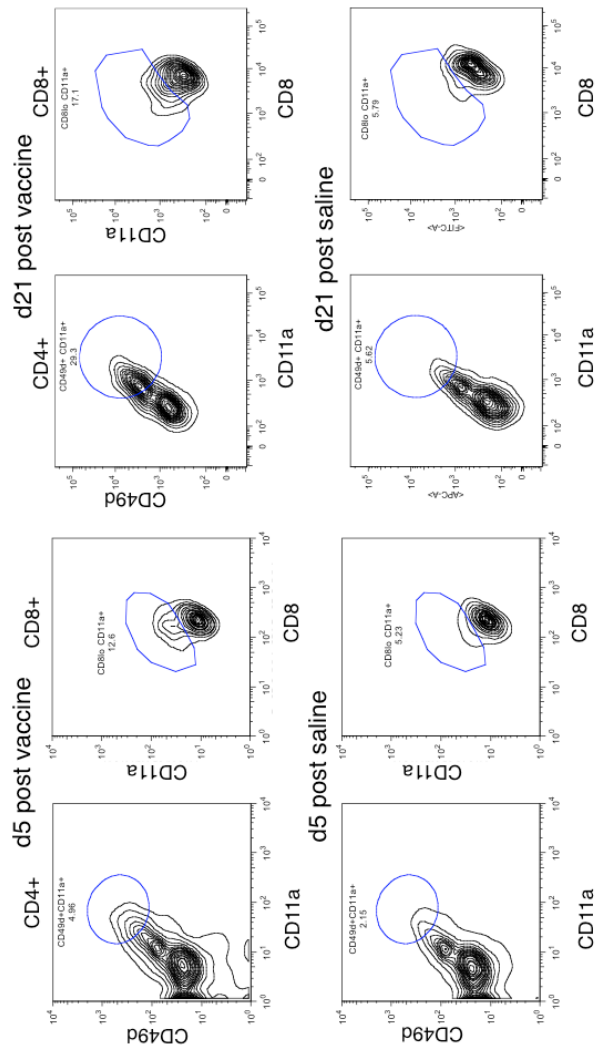


**b**



**Supp. Figure 5.** *Visualization of attenuated parasites in spleen.* (a) RBCs from *P. chabaudi*-infected mice (39.8% parasitemia) were treated with 2 $\mu$ M centanamycin. RBC membranes and parasite DNA were stained with DiI and HO, respectively. Membrane-stained normal RBCs from naïve A/J mice and dual stained attenuated parasites were analysed by flow cytometry prior to injection into naïve A/J mice. (b) Spleen sections from recipient mice were prepared at 24hr and stained with APC anti-mouse F4/80 IgG and nuclei counter-stained with SYTOX Green. The slides were analysed by confocal microscopy. The colours indicated are: F4/80 (red); DiI (yellow); HO (blue); and nuclei (green).

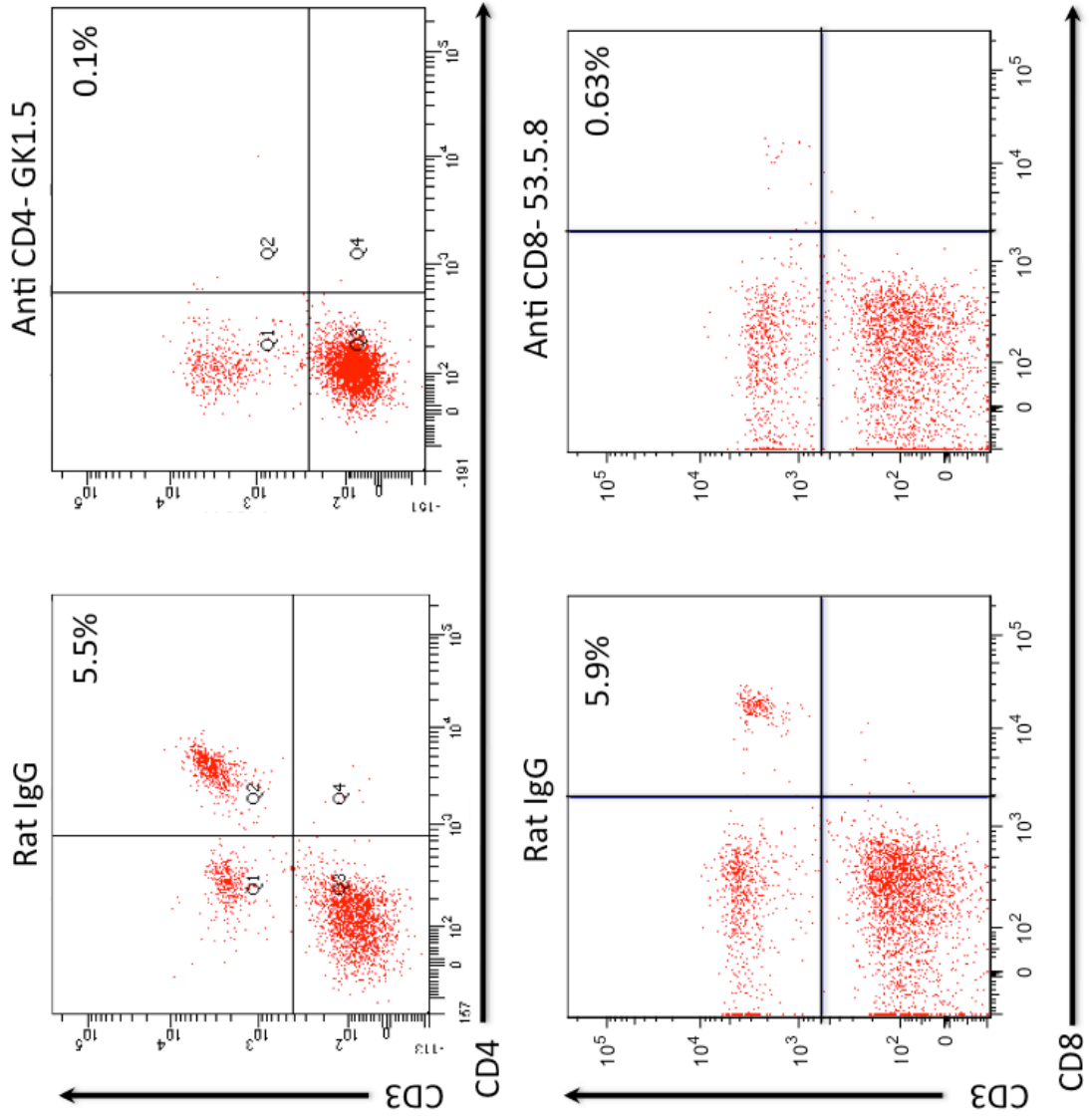
Supp. Fig 6



**Supp. Figure 6.** *Flow cytometry plots of CD4<sup>+</sup>CD49d<sup>+</sup> CD11a<sup>+</sup> and CD8<sup>lo</sup> CD11a<sup>+</sup>.*

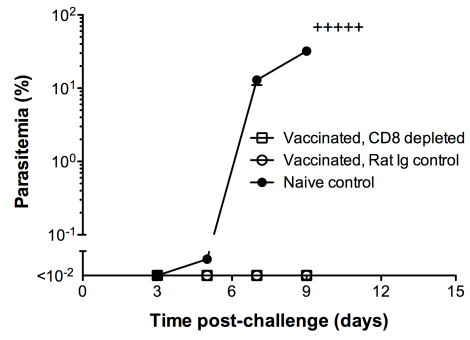
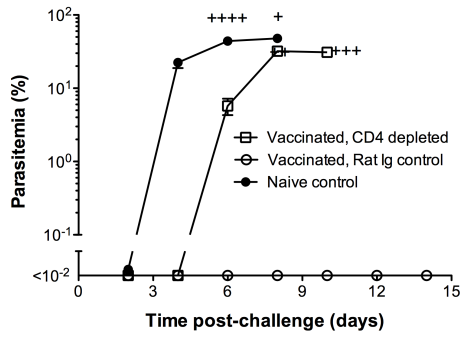
Here are representative plots showing *CD4<sup>+</sup>CD49d<sup>+</sup> CD11a<sup>+</sup> and CD8<sup>lo</sup> CD11a<sup>+</sup>* populations in peripheral blood of saline and vaccine immunized mice at days 5 and days 21 post injection. Inset numbers indicate the percentage of cells found within their respective gates. The gates chosen for the saline controls and vaccine groups were identical for each time point and chosen to include only the brightest CD49d and CD11a cells.

Supp. Fig 7



**Supp. Figure 7.** *Depletion of CD4 and CD8 T cells in vivo.* Mice were treated with 500ug of anti-CD4 (GK1.5), anti-CD8 (53.5.8) or rat IgG i.p. on days -4, -3,-2,-1,0,+1 relative to challenge. Here are representative plots showing CD4 and CD8 in spleens of control and depleted mice.

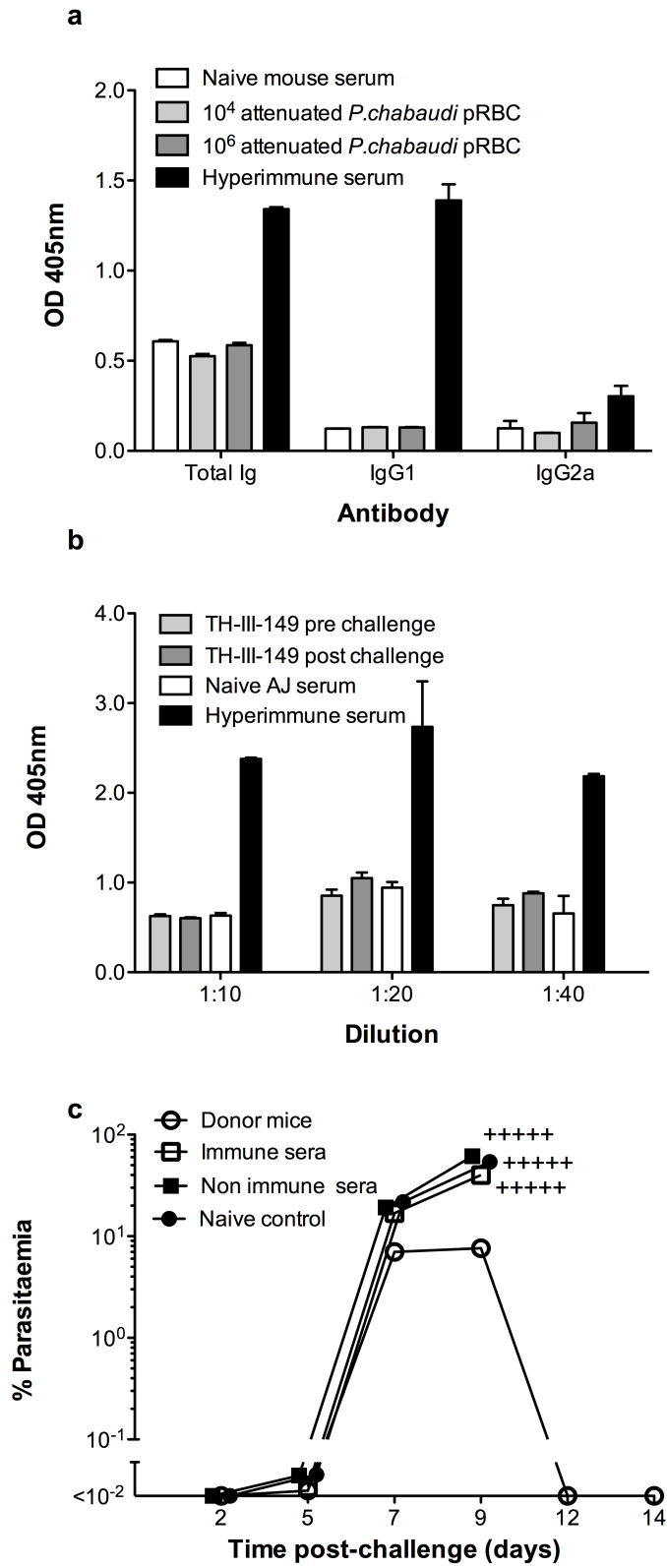
Supp. Fig 8



**Supp. Figure 8.** *CD4 T cells contribute to vaccine mediated protection.* To assess the role of T cell subsets in immunity, A/J mice were immunized with three doses of  $10^6$  *P. chabaudi* pRBC attenuated with centanamycin. Mice were immunodepleted as indicated eight weeks after immunization, then challenged with  $10^5$  *P. chabaudi* pRBC i.v. and parasitemia monitored. '+' indicates that a mouse succumbed to the infection..

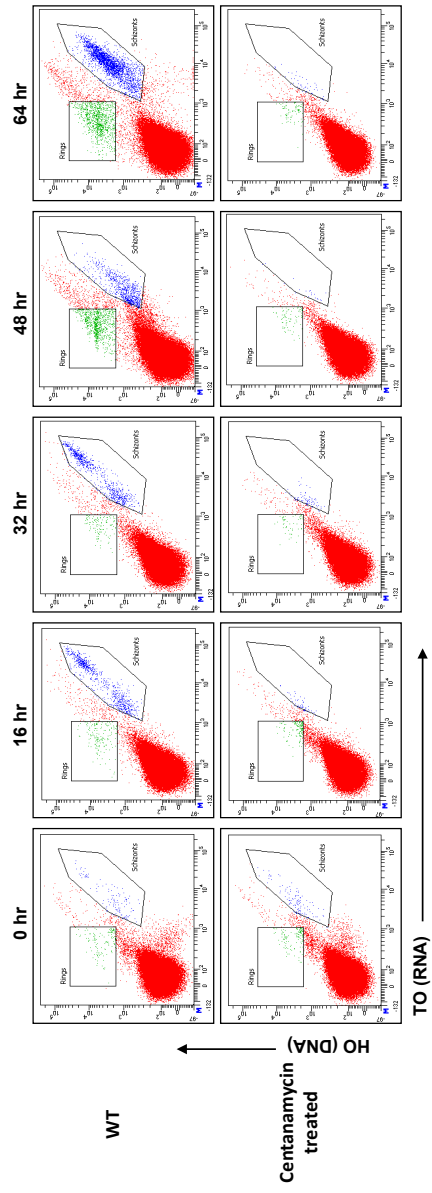


Supp. Fig 9



**Supp. Figure 9.** *Vaccine does not elicit elevated parasite specific antibodies and serum from immunized mice does not confer protection.* (a) Parasite-specific antibody titers were assessed by ELISA eight weeks after immunization with three doses of  $10^4$  or  $10^6$  centanamycin-attenuated *P. chabaudi* pRBC. Antigen was prepared from *P. chabaudi* blood stages as described in methods. Hyperimmune serum from a mouse that had received multiple patent infections. (b) Parasite-specific antibody titers were assessed by ELISA from samples collected after immunization with three doses of  $10^6$  TH-III-149 attenuated *P. chabaudi* pRBC (pre-challenge) and then again on d38 post challenge with  $10^5$  *P. chabaudi* pRBC. Error bars represent S.E.M. for triplicate ELISA samples. (c) Sera from 10 A/J mice immunized with 3 doses of *P. chabaudi* AS centanamycin attenuated or 10 naïve A/J mice was transferred to groups of 5 naïve A/J recipients on days -1, 0, and 1 relative to challenge on day 0 with  $10^5$  *P. chabaudi* AS. Donor immunized A/J mice were challenged and protected. '+' indicates that a mouse succumbed to the infection.

Supp. Fig 10



**Supp. Figure 10.** *Attenuation of P. falciparum by centanamycin.* Parasites were synchronized to ring stages (rectangles) and either treated with centanamycin (2  $\mu$ M) or left untreated before culturing. At the given time points, samples were stained with Hoechst (HO) and Thiazole Orange (TO) and analyzed by flow cytometry.