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Title: A new H<sub>2</sub>S-releasing peptide hydrogel limits the development of intimal hyperplasia in human vein segments

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Keywords: Intimal Hyperplasia; Smooth Muscle Cells; Proliferation; hydrogen sulfide; hydrogel

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Abstract: Currently available interventions for vascular occlusive diseases suffer from high failure rates due to re-occlusive vascular wall adaptations, a process called intimal hyperplasia (IH). Naturally occurring hydrogen sulfide (H<sub>2</sub>S) works as a vasculoprotective gasotransmitter in vivo. However, given its highly reactive and hazardous nature, H<sub>2</sub>S is difficult to administer systemically. Here, we developed a novel hydrogel capable of localized slow release of precise amounts of H<sub>2</sub>S and tested its benefits on IH.

The H<sub>2</sub>S-releasing hydrogel was prepared from a short peptide attached to an S-arylothiooxime H<sub>2</sub>S donor. Upon dissolution in aqueous buffer, the peptide self-assembled into nanofibers, which formed a gel in presence of calcium. This new hydrogel delivered H<sub>2</sub>S over the course of several hours, in contrast with fast-releasing NaHS.

The H<sub>2</sub>S-releasing peptide/gel inhibited primary human vascular smooth muscle cells (VSMC) proliferation and migration. In contrast, it promoted human umbilical endothelial cells (EC) proliferation and migration. Finally, both NaHS and the H<sub>2</sub>S-releasing gel limited IH in human great saphenous vein segments obtained from vascular patients undergoing bypass surgery, with the H<sub>2</sub>S-releasing gel showing efficacy at a 5x lower dose than NaHS.

Our data suggest local perivascular H<sub>2</sub>S release as a new strategy to limit VSMC proliferation and IH while promoting EC proliferation, hence re-endothelialization.

Research Data Related to this Submission

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There are no linked research data sets for this submission. The following reason is given:

Data will be made available on request

*Nanomedicine: Nanotechnology,  
Biology, and Medicine*

Lausanne, April 12, 2019

Dear Editor,

Please find enclosed our manuscript entitled “**A new H<sub>2</sub>S-releasing peptide hydrogel limits the development of intimal hyperplasia in human vein segments**” by Longchamp et al., which we submit for publication to *Nanomedicine: Nanotechnology, Biology, and Medicine*.

Arterial occlusive disease is the leading cause of death in Western countries. Contemporary therapies, including angioplasties, stenting and bypass surgery, still suffer from high failure rates due to re-occlusive vascular wall adaptations, which result in costly and complex recurrent end-organ ischemia, and often lead to loss of limb, brain function, or life. Hydrogen sulfide (H<sub>2</sub>S) is an endogenous gasotransmitter with vasculoprotective properties. However, given its highly reactive and hazardous nature, H<sub>2</sub>S is difficult to administer. Here, we developed a novel self-assembling H<sub>2</sub>S-releasing hydrogel and tested its benefits on restenosis using human vein segments obtained from patients undergoing bypass surgery. Our findings suggest local perivascular H<sub>2</sub>S release as a new strategy to limit VSMC proliferation and restenosis while promoting EC proliferation, hence re-endothelialization.

The submitted manuscript is a revised version of manuscript **jbmt47934**, which was submitted to *Biomaterials* in February 2019. In this revised version, we addressed a number of issues raised by the reviewers to clarify the methods and translational potential of our H<sub>2</sub>S-releasing peptide hydrogel.

We believe these data to be of interest to the readership of the *Nanomedicine: Nanotechnology, Biology, and Medicine*, describing a new hydrogel with therapeutics potential for the clinical treatment of restenosis in vascular patients.

All authors have read and approved the submission of the manuscript. We certify that this manuscript, or any part of it, has not been published and will not be submitted elsewhere for publication while being considered by the journal *Nanomedicine: Nanotechnology, Biology, and Medicine*.

Thank you very much for your editorial consideration.

Sincerely,

Dr. Florent Allagnat and Prof. John Matson

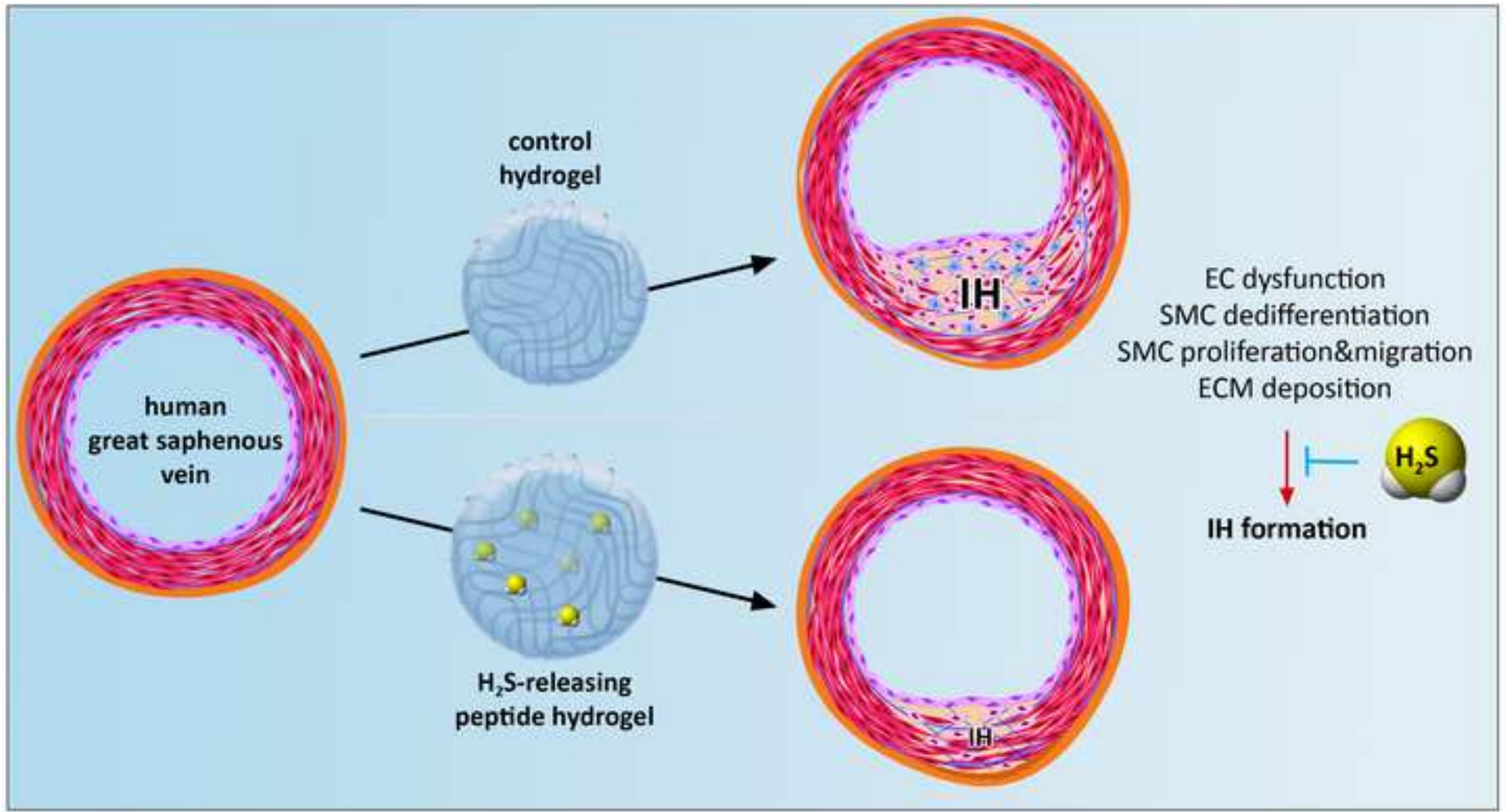
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## Graphical abstract

In this work, we describe a novel Hydrogen Sulfide (H<sub>2</sub>S)-releasing peptide that self-assembles into nanofibers and forms a gel in presence of calcium. This hydrogel capable of localized slow release of H<sub>2</sub>S inhibited the development of intimal hyperplasia (IH) in a model of static culture of human great saphenous vein segments obtained from vascular patients undergoing bypass surgery.



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4 **A new H<sub>2</sub>S-releasing peptide hydrogel limits the development of intimal hyperplasia in**  
5  
6 **human vein segments**  
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43 interest associated with this publication and there has been no significant financial support for this  
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45 work that could have influenced its outcome.  
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51 Original article  
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53 **Running title:** H<sub>2</sub>S decreases VSMC proliferation and intimal hyperplasia  
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56 **Word count:** Abstract: 205; Manuscript: 8524; 9 figures, 51 references  
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4 **Abbreviations**  
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7 CAC: critical aggregation concentration  
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9 CD: Circular dichroism  
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11 EC: endothelial cells  
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14 HUVEC: human umbilical vein EC  
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16 H<sub>2</sub>S: hydrogen sulfide  
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18 IH: intimal hyperplasia  
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21 L-Cys: L-Cysteine  
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23 OBHA: O-benzyl hydroxylamine  
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26 PCNA: proliferating cell nuclear antigen  
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28 SATO: S-arylothiooxime  
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31 SM22 $\alpha$ : smooth muscle 22 alpha  
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33 VSMC: vascular smooth muscle cells  
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37 **Author Contributions**  
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39 FA, JBM, JMC and SD designed the project  
40

41  
42 FA, AL, KK, DM, SD and CD performed the experiments  
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44  
45 FA, JBM, AL, KK, DM and SD analyzed the data  
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47  
48 FA, JBM, AL, KK and DM wrote the manuscript  
49  
50  
51

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**Keywords:** Intimal Hyperplasia; Smooth Muscle Cells; Proliferation; hydrogen sulfide; hydrogel



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4 **ABSTRACT**  
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7 Currently available interventions for vascular occlusive diseases suffer from high failure rates due to  
8 re-occlusive vascular wall adaptations, a process called intimal hyperplasia (IH). Naturally occurring  
9 hydrogen sulfide (H<sub>2</sub>S) works as a vasculoprotective gasotransmitter *in vivo*. However, given its  
10 reactive and hazardous nature, H<sub>2</sub>S is difficult to administer systemically. Here, we developed a novel  
11 hydrogel capable of localized slow release of precise amounts of H<sub>2</sub>S and tested its benefits on IH.  
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19 The H<sub>2</sub>S-releasing hydrogel was prepared from a short peptide attached to an *S*-aroylthiooxime H<sub>2</sub>S  
20 donor. Upon dissolution in aqueous buffer, the peptide self-assembled into nanofibers, which formed  
21 a gel in presence of calcium. This new hydrogel delivered H<sub>2</sub>S over the course of several hours, in  
22 contrast with fast-releasing NaHS.  
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29 The H<sub>2</sub>S-releasing peptide/gel inhibited primary human vascular smooth muscle cells (VSMC)  
30 proliferation and migration, while promoting human umbilical endothelial cells (EC) proliferation  
31 and migration. Both NaHS and the H<sub>2</sub>S-releasing gel limited IH in human great saphenous vein  
32 segments obtained from vascular patients undergoing bypass surgery, with the H<sub>2</sub>S-releasing gel  
33 showing efficacy at a 5x lower dose than NaHS.  
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41 Our data suggest local perivascular H<sub>2</sub>S release as a new strategy to limit VSMC proliferation and IH  
42 while promoting EC proliferation, hence re-endothelialization.  
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## Background

Despite remarkable technological advances, the rate of restenosis due to intimal hyperplasia (IH) one year following endovascular reconstruction or bypass surgery reaches 30%<sup>1</sup>. IH is driven by the dysfunction of endothelial cells (EC) lining the inner part of the vessels, which results in a reprogramming of the vascular smooth muscle cells (VSMC) from a contractile differentiated phenotype to a proliferating and migrating phenotype. These cells proliferate and secrete extracellular matrix, leading to the formation an occlusive neo-intima layer at the site of injury<sup>2</sup>. The available systemic drug therapies used to prevent restenosis are generally poorly tolerated and show narrow therapeutic ranges<sup>3,4</sup>. Localized treatments include drug-eluting angioplasty balloons and stents, which limit VSMC proliferation and reduce IH, but they also delay re-endothelization, limiting their efficacy and prolonging the need for anti-thrombotic medication.

H<sub>2</sub>S is an endogenous gasotransmitter, along with nitric oxide (NO) and carbon monoxide (CO)<sup>5</sup>. Enzymatically produced *in vivo* by cystathionine  $\gamma$ -lyase (CSE), cystathionine  $\beta$ -synthase (CBS), and 3-mercaptopyruvate sulfurtransferase (3-MST), H<sub>2</sub>S regulates numerous signaling pathways and physiological processes, including blood pressure, inflammation, metabolism, redox balance and, overall, cellular homeostasis<sup>6,7</sup>. In humans, serum H<sub>2</sub>S concentration declines with age<sup>8</sup> and the circulating levels of H<sub>2</sub>S are reduced in patients suffering from cardiovascular diseases<sup>9,10</sup> and diabetes<sup>11</sup>.

To tap the therapeutic potential of this gasotransmitter, numerous synthetic H<sub>2</sub>S donors have been developed for exogenous administration. H<sub>2</sub>S donors are molecules that release H<sub>2</sub>S by either hydrolysis or in response to a specific trigger, such as a thiol or other nucleophiles<sup>12</sup>. However, H<sub>2</sub>S delivery via small molecule donors is often limited by short release periods, low water solubility, lack of target specificity, and toxicity in some cases<sup>12,13</sup>. To address these

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4 shortcomings, H<sub>2</sub>S donors have been incorporated into water-soluble polymers, micelles,  
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6 hydrogels, nanofibers, and films, in an attempt to limit toxicity and extend the H<sub>2</sub>S release period  
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9<sup>14-18</sup>. Despite these improvements, there is still a growing need for H<sub>2</sub>S-releasing materials capable  
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11 of delivering H<sub>2</sub>S directly at a site of interest for an extended period of time<sup>19,20</sup>. Peptide-based  
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13 hydrogels have been widely used for tissue engineering and regenerative medicine<sup>21</sup>, but only a  
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15 handful of reports detail their use in delivering gasotransmitters<sup>22-24</sup>.  
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19 Here, we developed and tested the safety and therapeutic potential of a type of self-  
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21 assembling aromatic peptide amphiphile, employing an H<sub>2</sub>S-releasing *S*-aroylthiooxime (SATO)  
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23 group as the aromatic component. We found that our H<sub>2</sub>S-releasing hydrogel promotes EC  
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25 function while inhibiting VSMC expansion and IH formation in human veins, at a significantly  
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27 lower dose than NaHS.  
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## METHODS

### *Chemicals*

Rink Amide MBHA resin and 9-fluorenylmethoxy carbonyl (Fmoc) protected L-amino acids were purchased from P3biosystems and used as received. HBTU, *N*-methylpiperidine, DBU and other reagents for peptide synthesis were purchased from commercial vendors and used as received unless otherwise noted. The solvents employed for peptide synthesis were reagent grade.

### *Peptide synthesis and purification*

Peptides were synthesized either manually or using a Liberty 1 microwave-assisted peptide synthesizer (CEM) using solid-phase peptide synthesis (SPPS) via standard Fmoc protocol as described previously<sup>24</sup>. 4-Formyl benzoic acid was coupled to the N-terminus of the peptide on resin using HBTU and DIEA in DMF. After cleavage and isolation, peptides were dissolved in water containing 0.1% NH<sub>4</sub>OH and filtered through a 0.45 μm PTFE filter before purification. Purification by preparative-scale reverse phase-high performance liquid chromatography (RP-HPLC) was carried out on an Agilent Technologies 1260 Infinity HPLC system, eluting with a gradient of 2% ACN to 90% ACN in milliQ H<sub>2</sub>O over 33 min using an Agilent PLRP-S column (100Å particle size, 25 x 150 mm) and monitoring at 220 nm. To both mobile phases was added 0.1% NH<sub>4</sub>OH to aid in solubility. Fractions were analyzed by mass spectrometry (Advion ExpressIon Compact Mass Spectrometer), and product-containing fractions were combined, rotovapped to remove ACN, and lyophilized (LabConco).

The lyophilized peptide FBA-IAVEE was dissolved in dry DMSO and reacted with *S*-benzoylthiohydroxylamine (SBTHA) in the presence of catalytic TFA to afford the final SATO-FBA-IAVEE peptide. Peptide FBA-IAVEEEE was similarly reacted with *O*-benzyl

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4 hydroxylamine hydrochloride (OBHA·HCl) in dry DMSO, but without using TFA, to afford the  
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6 non-H<sub>2</sub>S-releasing control peptide OBHA-FBA-IAVEEEEE. Peptides were dissolved in a mixture  
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8 of phosphate buffer (100 mM at pH 7.4) and acetonitrile (5:2 v/v) and filtered through a 0.45 μm  
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10 PTFE filter before purification. Purification was carried out using RP-HPLC, eluting with a  
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12 gradient of 2% ACN to 90% ACN in milliQ H<sub>2</sub>O without any additives. The protocol for analysing  
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14 and recovering the peptides was the same as described above. The final peptides were dissolved  
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16 in milliQ water and distributed into aliquots (100 μg each). Aliquots were frozen, lyophilized, and  
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18 stored at -20 °C.  
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### 23 24 *Critical aggregation concentration (CAC) measurements*

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26 Nile red stock solution in acetone (1 mg/mL) was diluted in milliQ water to a concentration of  
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28 0.01 mg/mL and was used to make all peptide solutions. A peptide stock solution was prepared at  
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30 4 mg/mL in the Nile red stock solution and was further diluted to the concentration of 3 mg/mL, 2  
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32 mg/mL, 1 mg/mL, 0.5 mg/mL, 0.25 mg/mL, 0.1 mg/mL, 0.01 mg/mL, 0.001 mg/mL, and 0.0001  
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34 mg/mL. All peptide dilutions were vortexed/sonicated for a few seconds, then 300 μL of each was  
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36 transferred to a 96-well plate, and the plate was allowed to sit in dark for 15-20 min. Florescence  
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38 spectra were recorded using a Varian Cary Eclipse fluorescence spectrophotometer  
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40 (FL1105M003) with an excitation wavelength of 550 nm. Florescence intensity measured at 628  
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42 nm was plotted against log[concentration], and the final CAC values were estimated to be the point  
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44 of intersection between the linear fits of high and low concentration regimes.  
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### 52 *Circular Dichroism (CD) Spectroscopy*

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54 CD spectra were measured at room temperature using a Jasco J-815 CD spectrometer (Jasco Inc.)  
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56 with a preset N<sub>2</sub> flow at 120 mL/min. The range of wavelengths employed was 250 to 190 nm (50  
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4 nm/min) with a response time of 8 s. Samples for both Pep-H<sub>2</sub>S and Pep-Ctrl were freshly prepared  
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6 at 10 mM (20 μL) in 1X PBS (pH 7.4) and were analysed using a dismountable quartz cuvette  
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8 with path length of 0.2 mm with 3 iterations for each sample. Raw spectra were converted to mean  
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10 residual ellipticity for comparison.  
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### 13 14 15 16 *Hydrogelation*

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18 Both Pep-H<sub>2</sub>S and Pep-Ctrl formed hydrogels in PBS solutions at physiological pH upon addition  
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20 of 4 μL of CaCl<sub>2</sub> solution (200 mM in water) to 90 μL of peptide solution (10 mM in 1X PBS).  
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22 The final concentration of CaCl<sub>2</sub> in the hydrogels was 8 mM.  
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### 30 31 *Rheology*

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33 Rheological experiments were done on an AR-2000 (TA instruments) using a 25 mm parallel plate  
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35 geometry. Buffered peptide solutions (240 μL, 1 wt.% peptide, ~10 mM) were prepared for each  
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37 peptide in 1X PBS (pH 7.4) and quickly transferred to the rheometer's bottom geometry. Gelation  
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39 was initiated upon addition of 10 μL CaCl<sub>2</sub> solution (200 mM in water) and the resulting solution  
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41 was mixed thoroughly with a pipet tip to ensure homogeneity. After allowing the solution to gel  
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43 for 10 min, the upper geometry was lowered to a pre-set gap of 500 μm, and a dynamic time sweep  
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45 was performed at a frequency of 1 Hz and 0.5% strain to measure storage (G') and loss (G'')  
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47 moduli. Each time sweep was followed by a dynamic frequency sweep (0.010-100 Hz at 0.5%  
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49 strain) and a strain sweep (1 Hz at 0.5-100% strain).  
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### 58 59 *Morphology analysis via TEM*

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4 Peptide solutions (10 mM in 0.05 M phosphate buffer at pH 7.4) were prepared and allowed to age  
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6 overnight, then diluted with water to 500  $\mu$ M. Next, 10  $\mu$ L of the peptide solution was deposited  
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8 on a carbon-coated copper TEM grid (300 mesh, Electron Microscopy Sciences), allowed to sit  
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10 for 5-6 min, and then gently blotted with filter paper. The grid was then washed by adding a drop  
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12 of MilliQ water, allowing it to stand for 1 min, and then blotting with filter paper. Samples were  
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14 stained with 10  $\mu$ L of a 2% uranyl acetate aqueous solution for 5-6 min, blotted with filter paper,  
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16 and allowed to dry in air before TEM observation. Images were taken on a Philips EM420 TEM  
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18 with a slow scan CCD camera.  
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#### 26 *H<sub>2</sub>S release measurements using an electrode probe*

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29 H<sub>2</sub>S release from the peptides was measured amperometrically using an electrode probe (ISO-  
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31 H2S-100-CXX, World Precision Instruments). A solution of either Pep-H<sub>2</sub>S or Pep-Ctrl (20  $\mu$ L of  
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33 0.1 mM solution in 1X PBS) was placed in an inner well inside a specially designed glass vial  
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35 equipped with a stir bar. An additional 76  $\mu$ L of 10 mM PBS buffer at pH 7.4 was then added to  
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37 the well, followed by 4  $\mu$ L of cysteine solution (5 mM in water). The final concentrations in the  
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39 inner well were 20  $\mu$ M in peptide and 0.2 mM (10 eq.) in cysteine. The well was immediately  
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41 covered with the gas-permeable membrane (Breathe easier, Diversified Biotech), and PBS buffer  
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43 at pH 7.4 (4.95 mL) mixed with 50  $\mu$ L of diethylenetriaminepentaacetic acid (DTPA) solution (10  
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45 mM in water) was added into the vial, covering the inner well. The H<sub>2</sub>S-selective microelectrode  
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47 was then immersed in the PBS solution, and the output signal was recorded. Similarly, H<sub>2</sub>S release  
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49 from Pep-H<sub>2</sub>S at 200  $\mu$ M was measured by mixing 17  $\mu$ L of peptide solution (1 mM) with 83  $\mu$ L  
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51 of PBS in the well followed by addition of 1  $\mu$ L (10 eq.) cysteine solution (200 mM in water). H<sub>2</sub>S  
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53 release from Gel-H<sub>2</sub>S was measured by placing 96  $\mu$ L of the peptide solution (10 mM in 1X PBS)  
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4 in the inner well followed by 4  $\mu\text{L}$  of  $\text{CaCl}_2$  to form a hydrogel. 10  $\mu\text{L}$  cysteine solution (200 mM  
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6 in water) was added, the well was covered with the membrane, and output signal was measured as  
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8 above. Calibration was carried out as previously reported.<sup>25</sup>  
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### 11 12 13 14 *Cell culture*

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17 Human veins were obtained from donors who underwent lower limb bypass surgery and static vein  
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19 cultures were performed as previously described<sup>26</sup>. Briefly, 5 mm segments of vein were kept in  
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21 culture for 7 days in RPMI-1640 Glutamax supplemented with 10 % FBS and 1% antibiotic  
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23 solution (10,000 U/mL penicillin G, 10,000 U/mL streptomycin sulphate) in cell culture incubator  
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25 at 37°C, 5%  $\text{CO}_2$  and 5%  $\text{O}_2$ . The cell culture medium was changed every 48 h. 5-mm segments  
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27 of vein were harvested after culture and fixed in 4% formalin and paraffin-embedded for  
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29 histological analysis. Five distinct vein segments coming from five different patients were used in  
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31 this study.  
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37 Human smooth muscle cells were also prepared from these human saphenous vein segments as  
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39 previously described<sup>26</sup>. Briefly, primary smooth muscle cells were cultured from human  
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41 saphenous veins from a similar cohort used for *ex-vivo* perfusion. Veins explants of 1–2 mm were  
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43 plated, luminal side down, on the dry surface of a 6-well culture plate, previously coated with 1%  
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45 Gelatin type B (Sigma-Aldrich). Explants were gently covered with one drop of RPMI, 10% FBS  
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47 medium, and placed overnight in a 37°C, 5%  $\text{CO}_2$ , 5%  $\text{O}_2$  environment. The next day, the culture  
48  
49 medium was carefully added to the wells, taking care not to detach the explants. VSMC, as  
50  
51 identified by positive staining for SMA (Abcam, ab5694), and desmin (Dako, M 0760) were  
52  
53 maintained in RPMI1640 supplemented with 10 vol. % FBS at 37°C, 5%  $\text{CO}_2$  and 5%  $\text{O}_2$ .  
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4 HUVECs purchased from Lonza were maintained in endothelial growth medium 2 (EGM-2;  
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6 Lonza) at 37°C, 5% CO<sub>2</sub> and 5% O<sub>2</sub> as previously described<sup>27</sup>. Passages 1 to 8 were used for the  
7  
8 experiments.  
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### 10 11 12 13 14 *Histomorphometry and Immunohistochemistry*

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17 5-mm segments of vein embedded in paraffin were cut into 5-µm sections. 2-mm out of 5-mm  
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19 were cut in 4 series of 10 slides with 5 sections per slides with a 250-µm interval between the  
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21 series. One slide per series was stained using Van Gieson-elastin (VGEL) staining. 3 images per  
22  
23 section were taken at a 100x magnification to cover the whole vein area. 8 measurements of the of  
24  
25 the intima and media thicknesses were made by images, evenly distributed along the length of the  
26  
27 vein wall<sup>28</sup>. Thus, for each vein, the intima and media thicknesses values are a mean of 4 series x  
28  
29 3 images x 8 measures = 96 independent measures. Morphometric measurements were done by  
30  
31 two independent researchers, one of them blind to the experimental groups, using the Leica Qwin®  
32  
33 software (Leica, Switzerland).  
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40 PCNA immunohistochemistry were similarly performed on paraffin sections. After rehydration  
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42 and antigen retrieval (TRIS-EDTA buffer, pH 9, 15 min in a microwave at 600 watts), human vein  
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44 sections were incubated overnight with the proliferating cell nuclear antigen antibody (PCNA;  
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46 M087901, Dako, Baar, Switzerland), washed and revealed using the EnVision +/HRP, DAB+  
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48 system according to manufacturer's instructions (Dako, Baar, Switzerland), and counterstained  
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50 with hematoxylin<sup>29</sup>. One slide per series was assessed and 3 images per section were taken at a  
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52 100x magnification. The PCNA and hemotoxlin positive nuclei were manually counted by two  
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54 independent observers unaware of the conditions.  
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4 *Immunofluorescent staining*  
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7 Cell immunostaining was performed on cells grown on glass coverslips ( $10^6$  cells per well in 24  
8 well plates) and fixed for 5 min in  $-20^\circ\text{C}$  methanol. BrdU immunostaining was performed as  
9 previously described using mouse anti-BrdU (BD Bioscience 55627, 1:200) and fluorescent-  
10 labelled anti-mouse secondary antibodies (AlexaFluor 568; 1/500, Thermo Fisher Scientific).  
11 BrdU positive nuclei were automatically detected using the ImageJ software and normalized to the  
12 total number of DAPI-positive nuclei.  
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22 Double immunostaining for calponin and smooth-muscle 22 alpha ( $\text{SM22}\alpha$ ) was performed on  
23 VSMC grown on glass coverslips and fixed for 5 min in  $-20^\circ\text{C}$  methanol. Cells were then  
24 permeabilized in PBS supplemented with 2 wt. % BSA and 0.3 vol. % Triton X-100 for 30 min,  
25 blocked in PBS supplemented with 2 wt. % BSA and 0.01 vol. % Tween 20 for another 30 min,  
26 and incubated overnight with the primary antibodies (mouse anti human calponin, DAKO;  
27 M3556;1/200 and rabbit anti human  $\text{SM22}\alpha$ , Abcam; 4106; 1/400). Cells were then washed 3  
28 times 5 min in PBS supplemented with 2 wt. % BSA and 0.01 vol. % Tween 20, and incubated for  
29 1 h at room temperature with a mix of fluorescent-labelled secondary antibodies (anti-rabbit  
30 AlexaFluor 488 and anti-mouse AlexaFluor 568; 1/500).  
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47 *Live-cell hydrogen sulfide measurement*  
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50 Free sulfide was measured in cells using the  $\text{SF}_7\text{-AM}$  fluorescent probe <sup>30</sup> (Sigma-Aldrich cat:  
51 748110). The probe was dissolved in anhydrous DMF at 5mM.  $10^5$  cells per well were plated in a  
52 96 well plate. 24 hours later, 5  $\mu\text{M}$   $\text{SF}_7\text{-AM}$  was added to VSMC or HUVEC and fluorescence  
53 (Ex: 495 nm/Em: 520 nm) was measured continuously in a Synergy Mx fluorescent plate reader  
54 at  $37^\circ\text{C}$  before and after addition of various donors as indicated. Linear regression of the  $\text{SF}_7\text{-AM}$   
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4 fluorescent signal was calculated during the linear part of the curves generated to deduce the H<sub>2</sub>S  
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6 release rate.  
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### 10 11 *Transmigration assays* 12 13

14  
15 The chemotactic-induced transmigration of human cells across a matrix barrier was investigated  
16  
17 using a Boyden chamber made of a polycarbonate membrane insert with 8-mm pores (Falcon; BD  
18  
19 Biosciences) placed in 24-well culture plates. Confluent VSMCs or HUVECs were trypsinized  
20  
21 and resuspended in RPMI 1640 medium without supplements and plated onto the transwell (10<sup>5</sup>  
22  
23 cells in 300 µL). Transwells with VSMC were placed in a 24-well plate with 400 µL of EGM-2  
24  
25 culture medium after 48 h in contact with HUVECs. Transwells with HUVECs were placed in a  
26  
27 24-well plate with 400 µL of fresh complete EGM-2 culture medium. In experiments with gels  
28  
29 (Gel-H<sub>2</sub>S and Gel-Ctrl), 10 µL/mL of gel (1 wt. %) was placed in the 24 well plate. After 8 h, 5  
30  
31 µg/mL calcein-AM (Thermo) was added to the well to stain the cells on the outer surface of the  
32  
33 membrane of the transwell. After 30 min and two washes with PBS, fluorescence was measured  
34  
35 using a fluorescent plate reader with an excitation wavelength of 485 nm and an emission  
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37 wavelength of 530 nm. Cells were also imaged using an inverted fluorescent microscope (Leica  
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### 50 *Statistical analyses* 51 52

53 All experiments were quantitatively analysed using GraphPad Prism® 6, and results are shown as  
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55 mean ± SEM. One-way ANOVA tests were performed followed by multiple comparisons using  
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57 *post-hoc* t-tests with the appropriate correction for multiple comparisons.  
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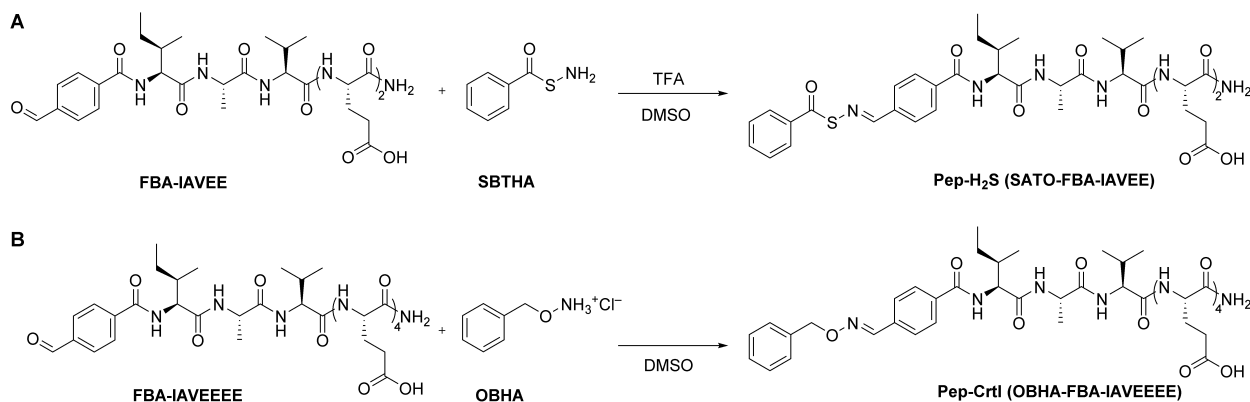
*Ethics statement*

Written, informed consent was obtained from all vein donors for human vein and VSMC primary cultures. The study protocols for organ collection and use were reviewed and approved by the Centre Hospitalier Universitaire Vaudois (CHUV) and the Cantonal Human Research Ethics Committee (<http://www.cer-vd.ch/>, no IRB number, Protocol Number 170/02), and are in accordance with the principles outlined in the Declaration of Helsinki of 1975, as revised in 1983 for the use of human tissues.

## RESULTS

### *Design and synthesis of an H<sub>2</sub>S-releasing peptide and a control peptide*

Self-assembling aromatic peptide amphiphiles rely on a combination of aromatic stacking of N-terminal aromatic groups and hydrogen bonding in a short peptide chain consisting of 2-6 amino acids to drive self-assembly in aqueous solution<sup>31-34</sup>. We based our peptide design for this study on our recent report on the first H<sub>2</sub>S-releasing aromatic peptide amphiphile<sup>23</sup>. Using an N-terminal SATO group as the aromatic component and a pentapeptide sequence modified from our original design to increase gel stiffness, the sequence used here for the H<sub>2</sub>S-releasing peptide (termed Pep-H<sub>2</sub>S) was SATO-FBA-IAVEE, where SATO represents the aromatic H<sub>2</sub>S donor, FBA represents 4-formylbenzoic acid, and IAVEE represents the peptide sequence using 1-letter codes. We also prepared a control peptide (termed Pep-Ctrl) incapable of releasing H<sub>2</sub>S with the sequence OBHA-FBA-IAVEEEEE, where OBHA represents *O*-benzyl hydroxylamine. Pep-Ctrl contains an oxime linkage in place of the acylthiooxime linkage in Pep-H<sub>2</sub>S, but the peptides are otherwise identical. In initial rheological studies, we found that two additional C-terminal Glu residues were needed in Pep-Ctrl compared with Pep-H<sub>2</sub>S to afford hydrogels with similar storage moduli. We speculate that stronger aromatic stacking and/or hydrogen bonding in the OBHA component vs. the SATO component leads to this requirement for a longer hydrophilic sequence, which tends to decrease storage modulus, in Pep-Ctrl.



## Scheme 1: peptide structures

A) Synthesis of Pep-H<sub>2</sub>S (sequence SATO-FBA-IAVEE). B) Synthesis of Pep-Ctrl (sequence OBHA-FBA-IAVEEEE).

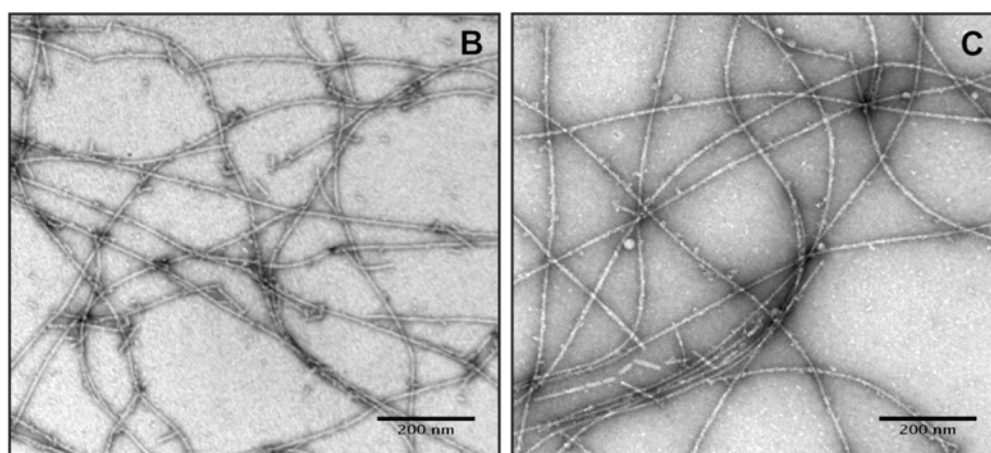
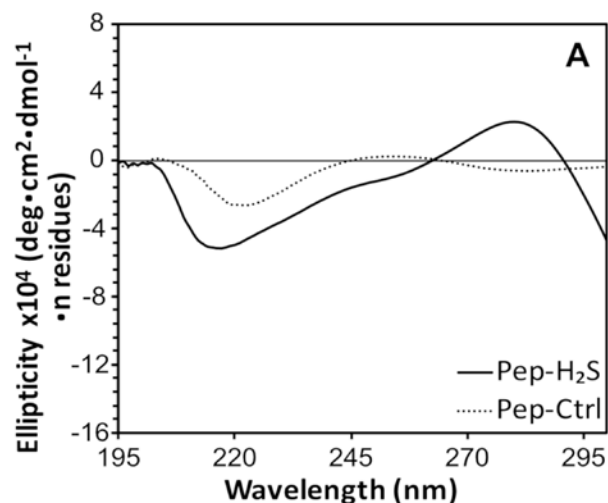
Peptides FBA-IAVEE and FBA-IAVEEEE were synthesized using Fmoc-based solid-phase peptide synthesis. The FBA units were coupled to the peptides on-resin before cleavage and purification of these two peptide-aldehydes. The two peptide aldehydes were then further derivatized to form the final aromatic peptide amphiphile products (**Scheme 1**). Pep-H<sub>2</sub>S was prepared by condensing the N-terminal aldehyde in FBA-IAVEE with *S*-benzoylthiohydroxylamine to form the final molecule. Pep-Ctrl was synthesized similarly, condensing FBA-IAVEEEE with hydroxylamine OBHA. Both peptides were purified by preparative HPLC after the condensation step, lyophilized, and aliquoted for further analysis.

### *Peptides self-assembled into nanoribbons*

Self-assembly is typically observed in amphiphilic molecules, where the hydrophobic component drives assembly as it excludes water. In dilute solution amphiphiles are molecularly dissolved, but self-assembly occurs above a given concentration, termed the critical aggregation concentration (CAC). Here we used the Nile red assay to determine the CAC for both Pep-H<sub>2</sub>S and Pep-Ctrl. The hydrophobic Nile red dye, which is non-fluorescent in a hydrophilic environment, incorporates within the hydrophobic core of the self-assembled nanostructures, resulting in a fluorescent enhancement proportional to the peptide concentration. The CAC is then defined as a point of abrupt change in the fluorescence intensity and refers to a minimum concentration above which the molecule exists primarily in a self-assembled state. In our experiments on Pep-H<sub>2</sub>S, we measured a CAC of 0.9 mM (near 1 mg/mL) for both peptides.

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4 With CAC values in hand, we next explored the molecular packing of the self-assembled  
5 aromatic peptide amphiphiles Pep-H<sub>2</sub>S and Pep-Ctrl. Circular dichroism (CD) spectra were  
6 measured for both Pep-H<sub>2</sub>S and Pep-Ctrl at 10 mM in 1X PBS buffer to evaluate secondary  
7 structure formation. Prominent minima at 217 nm and 220 nm for Pep-H<sub>2</sub>S and Pep-Ctrl,  
8 respectively, indicated the presence of  $\beta$ -sheets (**Figure 1A**). Typically,  $\beta$ -sheet signals in the CD  
9 spectra of short, self-assembling peptides indicates the formation of extended, 1-dimensional  
10 nanostructures, which are necessary for gelation <sup>35</sup>.  
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21 To explore further the self-assembled structures, we used conventional TEM with negative  
22 staining to image the nanostructures formed by Pep-H<sub>2</sub>S and Pep-Ctrl (**Figure 1B, C**). Aromatic  
23 peptide amphiphiles can take on many types of morphologies, including spheres, cylinders, flat or  
24 twisted ribbons, sheets, and others <sup>32,36</sup>. When long, one-dimensional objects are observed, these  
25 may entangle under certain conditions to form gels. In both cases we observed flat nanoribbons,  
26 many several microns in length, with widths around 6-7 nm, which was consistent with the CD  
27 spectra depicting  $\beta$ -sheets. The nanoribbons were uniform in width, likely due to the fact that both  
28 peptide nanostructures are assembled from pure, single molecules with no molecular weight  
29 dispersity.  
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**Figure 1: The peptides form long flat nanoribbons**

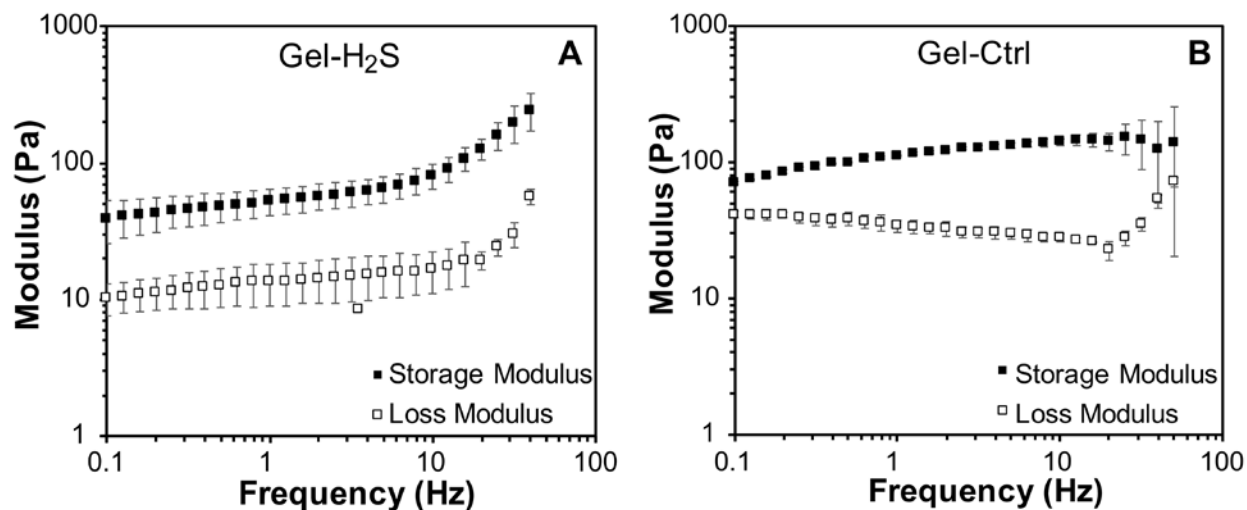
A) CD spectra for 10 mM Pep-H<sub>2</sub>S and Pep-Ctrl solution in 1X PBS buffer. Conventional TEM images for B) Pep-H<sub>2</sub>S and C) Pep-Ctrl. Peptides were dissolved at 10 mM in 50 mM phosphate buffer at pH 7.4. Samples were diluted to 500 μM before casting and stained with 2% uranyl acetate solution.

*Calcium salts triggered peptide gelation to form soft hydrogels*



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4 As noted above, aromatic peptide amphiphiles that form long, one-dimensional aggregates  
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6 may gel under conditions that promote entanglement of the nanostructures. We found that addition  
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8 of CaCl<sub>2</sub> promoted the rapid gelation of both Pep-H<sub>2</sub>S and Pep-Ctrl. This is likely due to two  
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10 factors: 1) Charge screening of the negatively charged Glu residues, which reside on the nanofiber  
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12 surface and cause the fibers to repel each other under low salt conditions; and 2) Formation of salt  
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14 bridges between the nanofibers due to the divalent nature of the calcium ion.  
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19 The gelation and viscoelastic properties of the hydrogels, termed Gel-H<sub>2</sub>S and Gel-Ctrl  
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21 when in the gel state, were evaluated by rheological measurements. Peptide solutions were first  
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23 prepared at 1 wt. % (~10 mM) in 1X PBS, and solutions were added directly to the rheometer.  
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25 Next, a solution of CaCl<sub>2</sub> in water was added to the peptide solutions to afford a final CaCl<sub>2</sub>  
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27 concentration of 8 mM. After a brief waiting period to allow for gelation throughout the sample,  
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29 the stiffness of each hydrogel was measured. Frequency sweeps of both Gel-H<sub>2</sub>S and Gel-Ctrl  
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31 revealed that the storage modulus (G') was higher than the loss modulus (G'') throughout the range  
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33 tested, indicating that both peptides formed robust, soft hydrogels (**Figure 2**). Gel-H<sub>2</sub>S showed a  
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35 storage modulus of 50 Pa at intermediate frequencies, while Gel-Ctrl showed a storage modulus  
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37 of 100 Pa. Both hydrogels were soft and easily manipulated by a spatula or syringe. At frequencies  
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39 above 10 Hz, both hydrogels showed increases in both G' and G''. This behavior is characteristic  
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41 of materials with non-covalent cross-linking such as peptide-based hydrogels<sup>37</sup>.  
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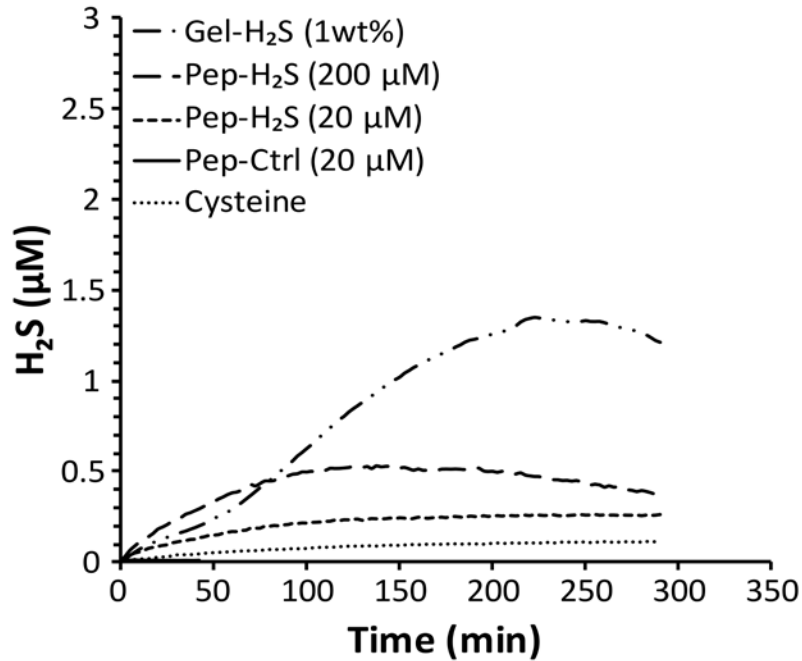
**Figure 2: The peptides form soft gels in presence of CaCl<sub>2</sub>**

Frequency sweep oscillatory rheology for hydrogels prepared at 1 wt% in 1 X PBS at pH 7.4 and gelled with CaCl<sub>2</sub>. A) Gel-H<sub>2</sub>S and B) Gel-Ctrl.

### *Peptide gel exhibited slow and sustained H<sub>2</sub>S release*

SATOs are thiol-triggered H<sub>2</sub>S donors<sup>25</sup>, so we aimed to evaluate H<sub>2</sub>S release from the peptides in solution and gel form in the presence of thiols. To obtain H<sub>2</sub>S release curves using real-time monitoring, we used an H<sub>2</sub>S-selective microelectrode probe (**Figure 3**). A solution of Pep-H<sub>2</sub>S at 20 μM, triggered with a 10-fold excess of Cys showed a steady rise in H<sub>2</sub>S concentration up to 0.2 μM over 120 min, after which it remained steady for another 160 min. Because H<sub>2</sub>S is constantly oxidizing and volatilizing, we typically observe peaking concentrations at values much lower than the starting concentration of the H<sub>2</sub>S donor. We also measured release at a 10-fold higher concentration to evaluate how this increase would affect the release rate. Similar to the 20 μM case, the H<sub>2</sub>S release profile for Pep-H<sub>2</sub>S at 200 μM showed a gradual release with a peaking time at 130 min at a concentration of 0.5 μM. As expected, Pep-Ctrl did not show any H<sub>2</sub>S release. We also tested release from Gel-H<sub>2</sub>S, prepared by addition of CaCl<sub>2</sub> to H<sub>2</sub>S-Pep, into a large

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4 volume of PBS. Release was slow and steady and continued rising slowly over 220 min up to a  
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6 peak concentration of 1.  $\mu\text{M}$  before tapering off. As measuring  $\text{H}_2\text{S}$  release from Pep- $\text{H}_2\text{S}$  and Gel-  
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8  $\text{H}_2\text{S}$  required different conditions, the peaking times and concentrations cannot be directly  
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10 compared; however, the peak shapes for the peptide under both solution and gel conditions show  
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12 slow and steady release, which we expect may be ideal for localized delivery of  $\text{H}_2\text{S}$ .  
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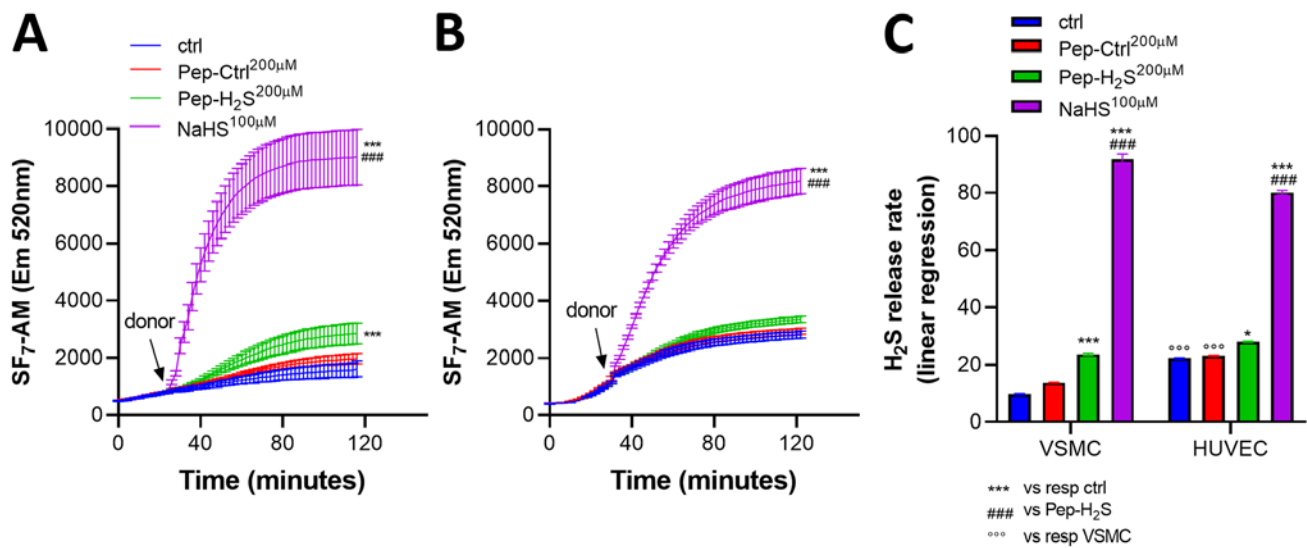
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40 **Figure 3: The  $\text{H}_2\text{S}$ -releasing peptide under both solution (Pep- $\text{H}_2\text{S}$ ) and gel (Gel- $\text{H}_2\text{S}$ )**  
41 **conditions shows slow and steady release in presence of cysteine**  
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45  $\text{H}_2\text{S}$  release curves measured on an  $\text{H}_2\text{S}$ -selective electrochemical probe comparing Pep- $\text{H}_2\text{S}$  (20  
46  $\mu\text{M}$  and 200  $\mu\text{M}$ ), Pep-Ctrl, and Gel- $\text{H}_2\text{S}$ .  
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52 *SF<sub>7</sub>-AM signal in VSMC and HUVEC upon addition of Pep-Ctrl and Pep- $\text{H}_2\text{S}$ .*  
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55 Live VSMC or HUVEC were incubated with the fluorescent  $\text{H}_2\text{S}$  probe SF<sub>7</sub>-AM, and fluorescence  
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57 was measured continuously before and after addition of 200  $\mu\text{M}$  Pep-Ctrl, Pep- $\text{H}_2\text{S}$  or 100  $\mu\text{M}$   
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59 NaHS. Experiments were performed in VSMC or HUVEC culture media containing 200  $\mu\text{M}$  L-  
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Cys. No additional thiol was added to trigger H<sub>2</sub>S release. Time-lapse imaging of SF<sub>7</sub>-AM in VSMC demonstrated that, in the no treatment condition or in cells exposed to Pep-Ctrl, VSMC produced little endogenous H<sub>2</sub>S, as evidenced by the slow and low buildup of the SF<sub>7</sub>-AM signal (**Figure 4A**). In contrast, the rate of endogenous H<sub>2</sub>S production was two-fold higher in HUVEC in the no treatment condition and in cells treated with Pep-Ctrl, as compared to VSMC (**Figure 4BC**). As expected, addition of NaHS rapidly raised the SF<sub>7</sub>-AM signal to similar levels in both cell types, while Pep-H<sub>2</sub>S induced a 4-fold slower release in both cell types (**Figure 4C**). Of note, 200 μM Pep-H<sub>2</sub>S was not sufficient to surpass significant endogenous SF<sub>7</sub>-AM signal in HUVEC, but it significantly raised the signal in VSMC above controls (**Figure 4C**). 20 μM Pep-H<sub>2</sub>S was not sufficient to generate detectable amounts of H<sub>2</sub>S in either cell type (data not shown).



**Figure 4: The peptide in solution show slow and steady release in cell culture**

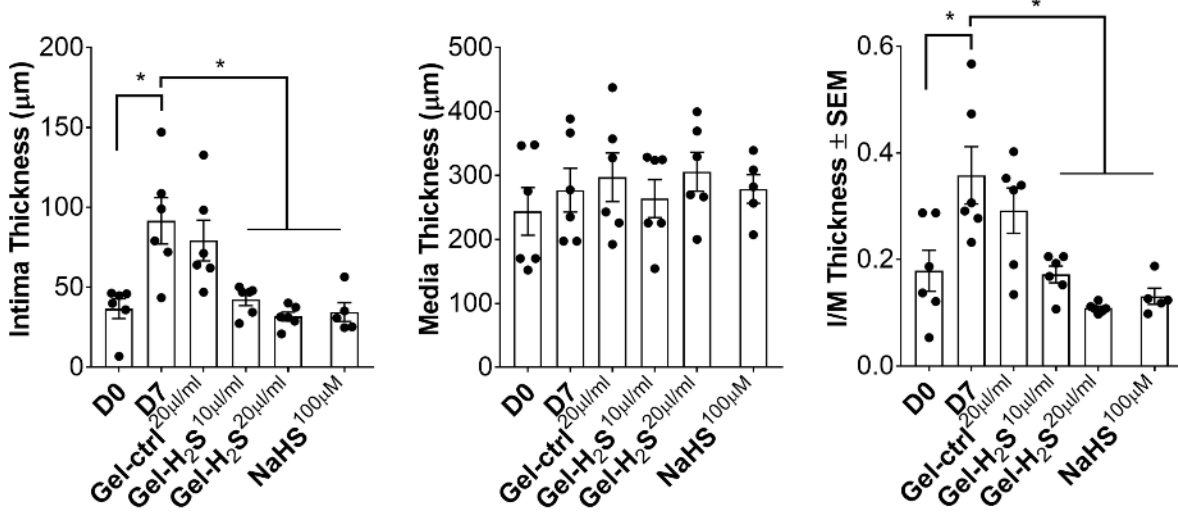
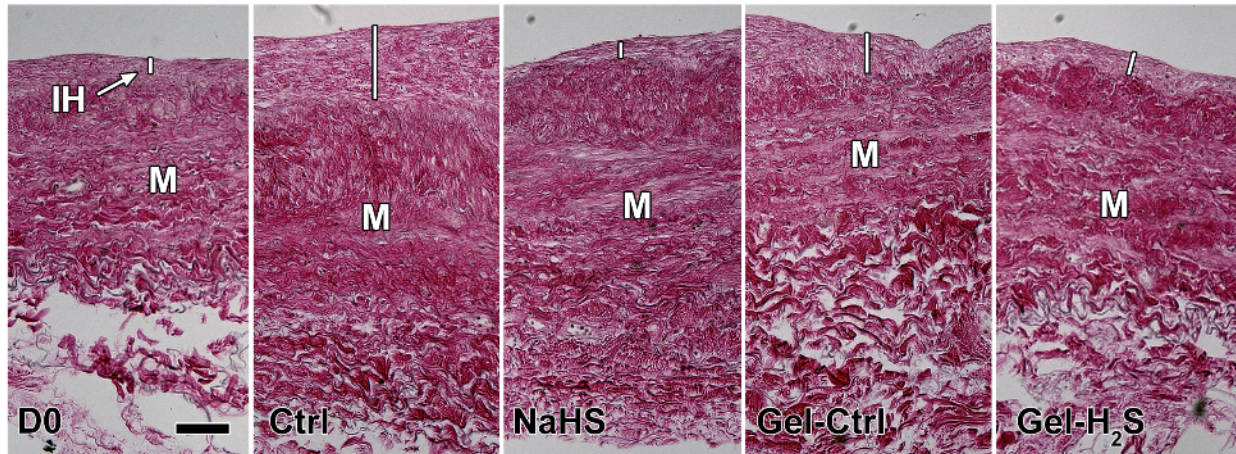
SF<sub>7</sub>-AM fluorescent signal in live primary human vascular smooth muscle cells (VSMC; **A**) or human umbilical vein endothelial cells (HUVEC; **B**) cultures exposed or not (Ctrl) to 100 μM NaHS, 200 μM Pep-Ctrl or 200 μM Pep-H<sub>2</sub>S for the indicated time. **C**) Linear regression of SF<sub>7</sub>-AM fluorescence curves to estimate H<sub>2</sub>S-releasing rates. Data are mean ± SEM of 4 independent experiments. \*P<0.05, \*\*\*P<0.001 vs. respective ctrl; ###P<0.001 vs. Pep-H<sub>2</sub>S; °°°p<0.001 vs.

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4 respective condition in VSMC, as determined by two-way ANOVA with post-hoc t-test with  
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6 Tukey's correction for multiple comparisons.  
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10 *Ex vivo treatment with the H<sub>2</sub>S-releasing gel prevented development of IH in human saphenous*  
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12 *vein segments*  
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15 The soft and robust nature of Gel-H<sub>2</sub>S and its sustained release profile led us to explore its  
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17 application in vascular diseases. To this end, we obtained human vein segments, which were placed  
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19 in culture for 7 d with or without Gel-H<sub>2</sub>S or Gel-Ctrl (10-20 μL gel/mL media). No additional L-  
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21 Cys was added to trigger H<sub>2</sub>S release as the cell culture media (RPMI) contains 200 μM L-Cys.  
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23 NaHS was also tested as a positive control of exogenous H<sub>2</sub>S supply. Gels (10 or 20 μL/mL,  
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25 equivalent to ~100 or ~200 μM sulfide, respectively) or NaHS (100 μM) were reapplied upon cell  
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27 culture media change every 48 h.  
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32 Histomorphometric analysis of intima and media thickness after 7 d in culture revealed that  
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34 Gel-H<sub>2</sub>S performed similarly to NaHS, with both fully preventing the development of IH, whereas  
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36 the control gel had no effect (**Figure 5**). For this analysis, we measured the thickness of the intima  
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38 and media in each vein and calculated the intima over media (I/M) thickness to correct for  
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40 variations in media thickness. Treatment of human vein segments with Gel-H<sub>2</sub>S (10 and  
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42 20 μL/mL) and 100 μM NaHS led to a 2-fold reduction in both intima thickness and I/M ratio,  
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44 while Gel-Ctrl had no effect (**Figure 5**). Importantly, treatment with Gel-H<sub>2</sub>S, Gel-Ctrl, or NaHS  
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46 did not affect the media thickness, suggesting no cytotoxic effect of exogenous H<sub>2</sub>S treatment.  
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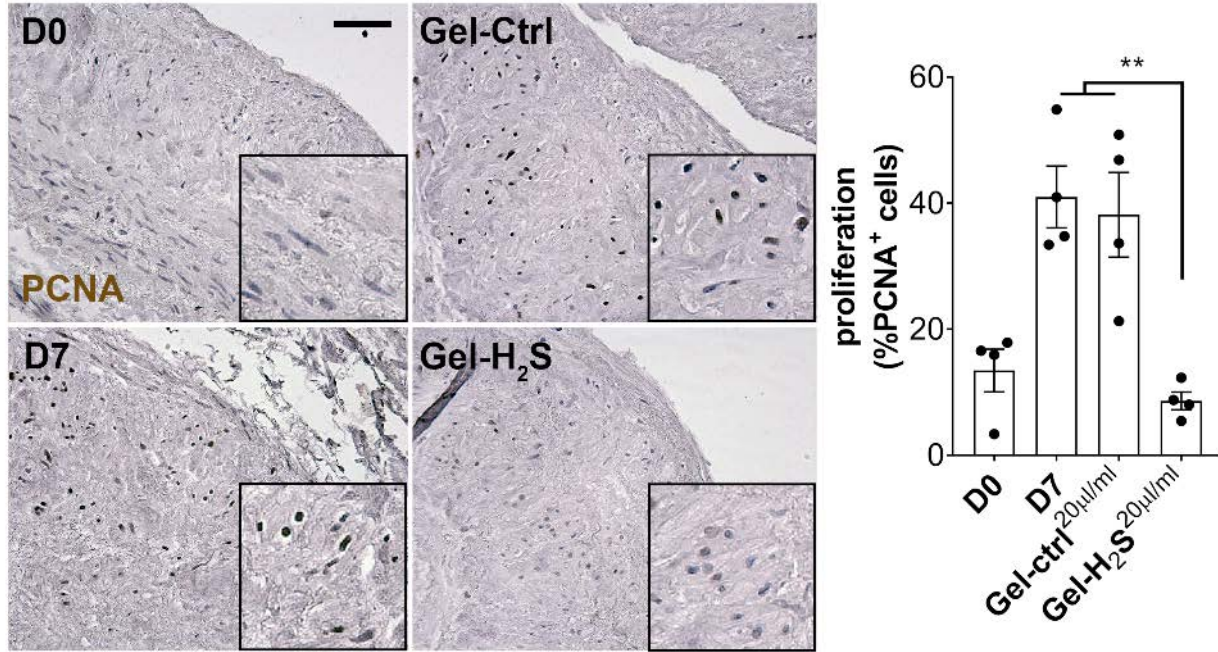
**Figure 5: Ex-vivo treatment with the H<sub>2</sub>S-releasing gel prevents the development of IH in human saphenous vein segments**

Human great saphenous vein segments obtained from donors who underwent lower limb bypass surgery were put or not (D0) in static culture for 7 days in presence or not (D7) of NaHS (100 μM), Gel-Ctrl (20 μL/mL) or Gel-H<sub>2</sub>S (10 or 20 μL/mL). Media was changed every two days, with fresh dilutions of H<sub>2</sub>S donors. Scale bar represents 200 μm. Data are shown as a scatter plots with mean±SEM of media, intima thicknesses and intima/media ratio (I/M) in 4 vein segments. \*P<0.05 vs D7 as determined by one-way ANOVA with post-hoc t-test with Dunnet's correction for multiple comparisons.

Next, we analyzed cell proliferation in the vein samples using PCNA immunostaining. As expected by the increase in neointima generated after 7 days in static culture (Figure 5), we



observed a two-fold increase in cell proliferation, mostly localized in the media layer, compared to baseline control (day 0) (Figure 6). This increase was prevented by Gel-H<sub>2</sub>S, but not by Gel-Ctrl, suggesting that H<sub>2</sub>S inhibited VSMC proliferation associated with the formation of IH.



**Figure 6: Ex-vivo treatment with the H<sub>2</sub>S-releasing gel reduces cell proliferation**

Human great saphenous vein segments were put or not (D0) in static culture for 7 days (D7) in presence of Gel-Ctrl (20  $\mu$ L/mL) or Gel-H<sub>2</sub>S (20  $\mu$ L/mL). Media was changed every two days, with fresh preparation of Gel. Scale bar represents 150  $\mu$ m. Insets are 3x magnification of main image. Data are shown as scatter plots with mean $\pm$ SEM of PCNA immunostaining (brown), counterstained with hematoxylin (blue) in 4 distinct veins. \*\*P<0.01 vs D7 as determined by one-way ANOVA with post-hoc t-test with Dunnet's correction for multiple comparisons.

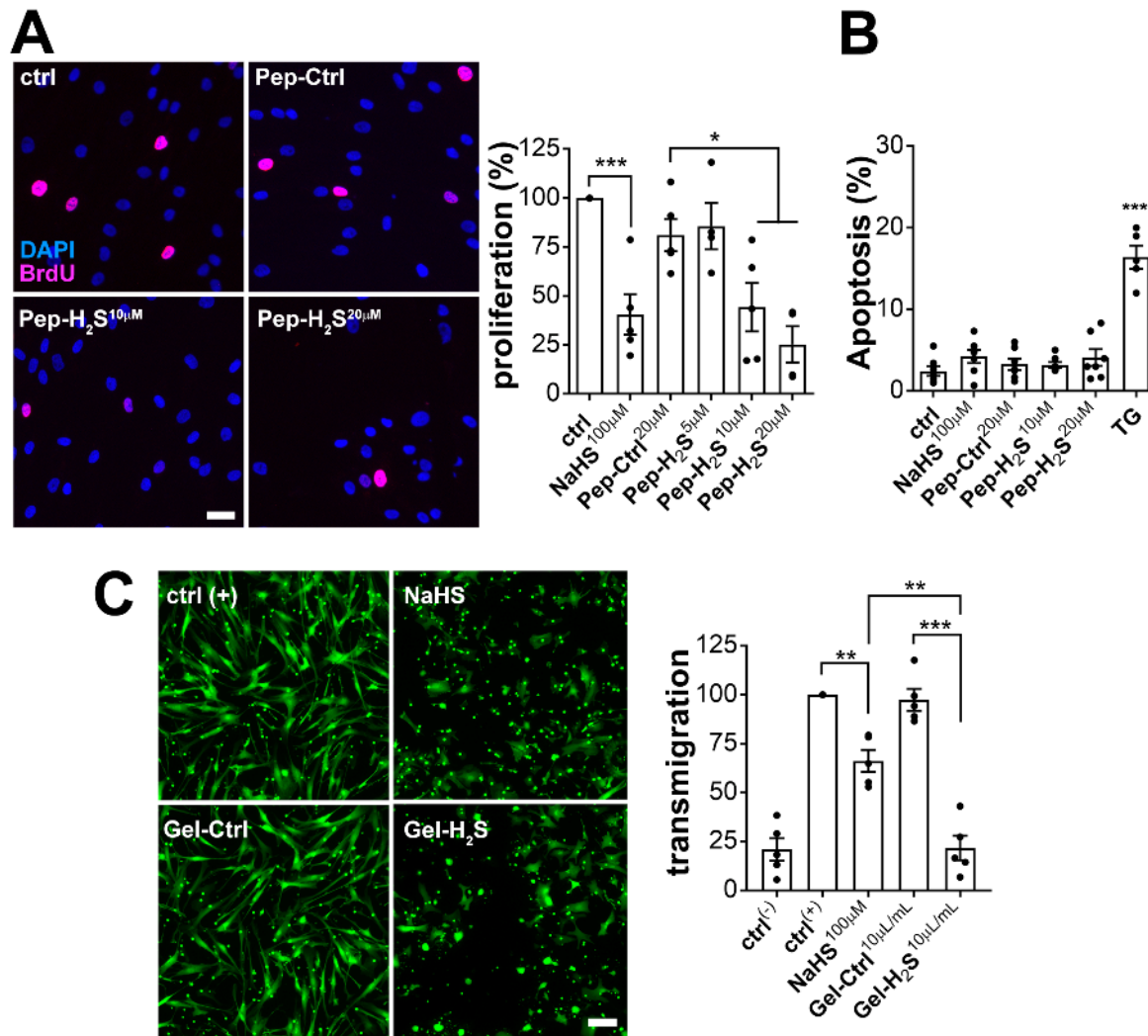
### *The H<sub>2</sub>S-releasing peptide/gel decreased VSMC proliferation and transmigration*

To understand further the cell-based effects of Pep-H<sub>2</sub>S and Gel-H<sub>2</sub>S, we examined human EC and VSMC proliferation and migration *in vitro*. IH is triggered by vessel injury, which leads to EC dysfunction and eventually death. The absence of ECs promotes VSMC dedifferentiation,

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4 proliferation, and migration, leading to IH. Therefore, we first examined how Pep-H<sub>2</sub>S and Gel-  
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6 H<sub>2</sub>S affected VSMCs in culture.  
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10 In line with our *ex-vivo* data on human vein segments, *in vitro* studies of VSMCs derived  
11 from human vein segments revealed that Pep-H<sub>2</sub>S inhibited cell proliferation in a dose-dependent  
12 manner, while Pep-Ctrl had no effect (**Figure 7A**). Importantly, 10 μM Pep-H<sub>2</sub>S had a similar  
13 effect as 100 μM NaHS. Media thickness data in human veins (**Figure 5**) suggested that the donors  
14 had no cytotoxic effect on VSMCs. To further test this observation, *in vitro* assessment of cell  
15 apoptosis using Hoechst-propidium iodide staining was conducted. The results confirmed that Pep-  
16 H<sub>2</sub>S, Pep-Ctrl, and NaHS had no toxic effect on VSMCs after 48 h of exposure (**Figure 7B**).  
17 Thapsigargin (TG) was used as a positive control to induce apoptosis (**Figure 7B**). Finally, using  
18 a transmigration assay in Boyden chambers, we observed that, as compared to the pre-conditioned  
19 EC culture medium alone (Ctrl<sup>+</sup>), the addition of NaHS or Gel-H<sub>2</sub>S (10 μL/mL), but not Gel-Ctrl,  
20 inhibited VSMC transmigration. Interestingly, Gel-H<sub>2</sub>S was significantly more potent than NaHS,  
21 fully blocking VSMC transmigration (**Figure 7C**).  
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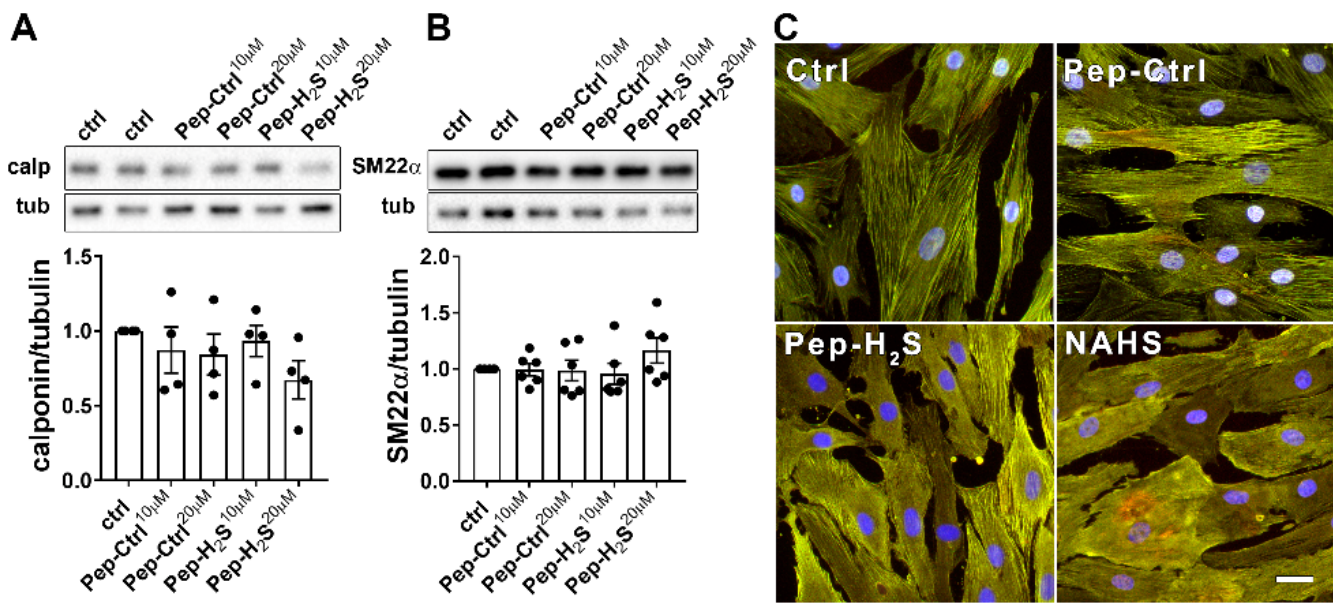


**Figure 7: The H<sub>2</sub>S-releasing gel inhibits VSMC proliferation and migration**

**A)** Primary human vascular smooth muscle cells (VSMC) were exposed or not (Ctrl) to 100  $\mu$ M NaHS, the control peptide (Pep-Ctrl) or the H<sub>2</sub>S-releasing peptide (Pep-H<sub>2</sub>S) for 24 h in presence of BrdU. Scale bar represents 20  $\mu$ m. Proliferation was calculated as the ratio of BrdU-positive nuclei over total DAPI-stained nuclei and expressed as % of proliferation in ctrl condition. **B)** VSMC apoptosis levels after a 48 h exposure to 100  $\mu$ M NaHS, the control peptide (Pep-Ctrl) or the H<sub>2</sub>S-releasing peptide (Pep-H<sub>2</sub>S), or a 24 h exposure to 100 nM thapsigargin as positive control. **C)** VSMC transmigration through an artificial membrane toward pre-conditioned medium of HUVECs (EGM-2 medium) supplemented or not (ctrl<sup>(+)</sup>) with 100  $\mu$ M NaHS, 10  $\mu$ L/mL of Gel-Ctrl or Gel-H<sub>2</sub>S for 16 h. Scale bar represents 50  $\mu$ m. All data are scatter plots with mean  $\pm$

SEM. \*P<0.05, \*\*P<0.01, \*\*\*P<0.001 vs ctrl<sup>(+)</sup> as determined by one-way ANOVA with post-hoc t-test with Tukey's correction for multiple comparisons.

We further studied VSMC phenotype. Western blot analyses of calponin and SM22 $\alpha$ , two VSMC-specific proteins, did not reveal major changes, although calponin levels tended to decrease in VSMCs exposed to the highest dose of Pep-H<sub>2</sub>S (20 $\mu$ M), but not Pep-Ctrl (**Figure 8A, B**). However, immunocytochemistry analysis revealed that NaHS and Pep-H<sub>2</sub>S (20 $\mu$ M), disrupted the typical cytoskeleton staining for calponin and SM22 $\alpha$  (**Figure 8C**), which may account for the reduced proliferation and mobility of VSMCs exposed to H<sub>2</sub>S.

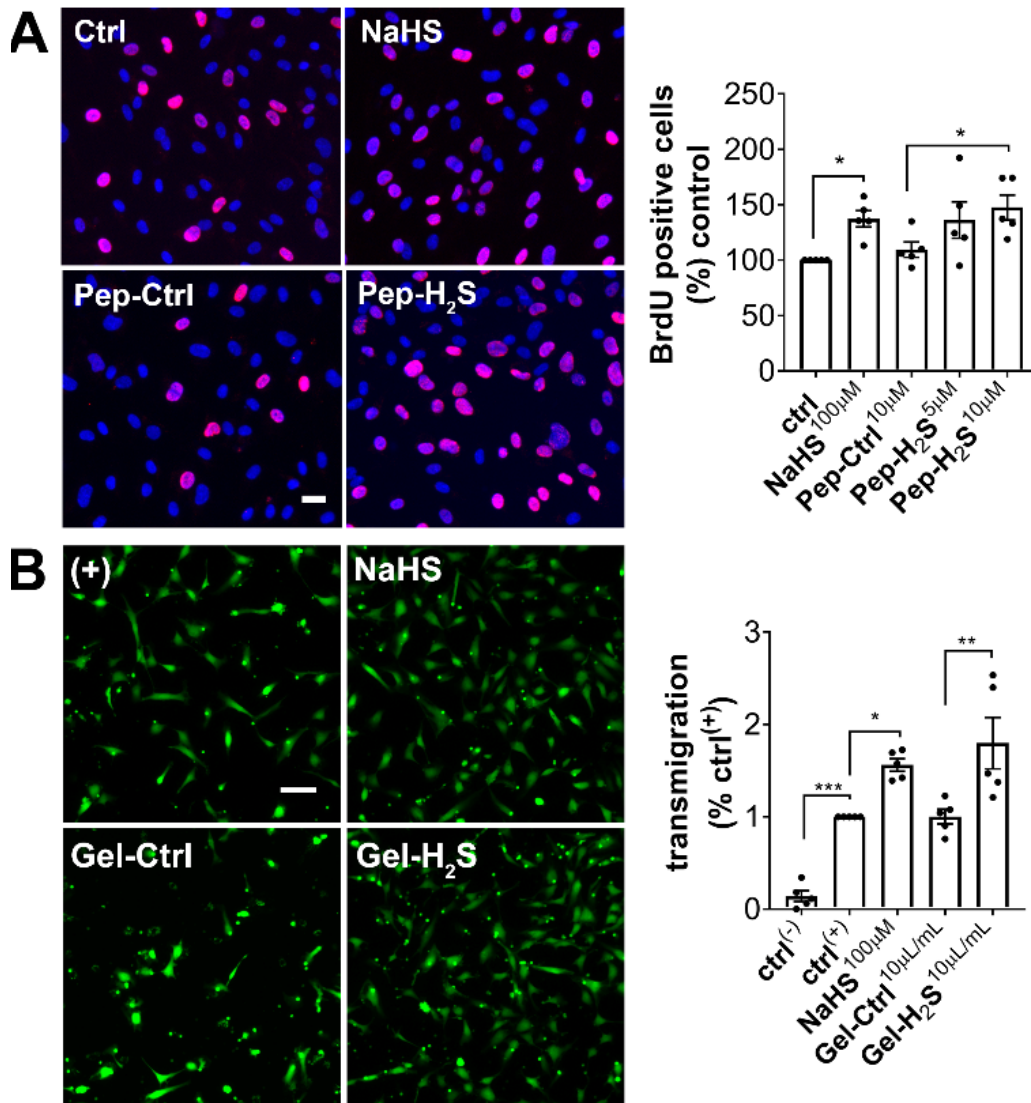


**Figure 8: The H<sub>2</sub>S-releasing peptide disrupts the VSMC cytoskeleton**

Primary human vascular smooth muscle cells (VSMC) were exposed or not (ctrl) to NaHS (100  $\mu$ M), the control peptide (Pep-Ctrl) or the H<sub>2</sub>S-releasing peptide (Pep-H<sub>2</sub>S) for 24 h. **A, B**) WB analysis of calponin (**A**) and SM22 $\alpha$  (**B**), over tubulin levels. **C**) VSMC immunofluorescent staining for calponin (red), SM22 $\alpha$  (green), and nuclei (DAPI staining in blue). Images are overlays of the 3 channels, representative of 5 independent experiments. Scale bar represents 20  $\mu$ m.

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4 *The H<sub>2</sub>S-releasing peptide/gel increased EC proliferation and transmigration*  
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7 We then performed similar experiments on human endothelial cells (HUVECs). H<sub>2</sub>S  
8 promotes EC proliferation, migration, and angiogenesis<sup>38</sup>. As expected, NaHS increased HUVEC  
9 proliferation. Interestingly, Pep-H<sub>2</sub>S was a more potent stimulator of HUVEC proliferation than  
10 NaHS, effective at a 10-fold lower dose than NaHS (**Figure 9A**). We also tested HUVEC  
11 proliferation. Interestingly, Pep-H<sub>2</sub>S was a more potent stimulator of HUVEC proliferation than  
12 NaHS, effective at a 10-fold lower dose than NaHS (**Figure 9A**). We also tested HUVEC  
13 transmigration toward full HUVEC culture medium. Consistently, and in contrast with VSMCs,  
14 NaHS and the Gel-H<sub>2</sub>S (10 μL/mL) promoted HUVEC transmigration (**Figure 9B**).  
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4 **Figure 9: Gel-H<sub>2</sub>S promotes HUVECs proliferation and migration**  
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7 **A)** Primary human endothelial cells (HUVEC) were exposed or not (ctrl) to 100 μM NaHS, the  
8 control peptide (Pep-Ctrl) or the H<sub>2</sub>S-releasing peptide (Pep-H<sub>2</sub>S) for 8h in presence of BrdU.  
9 Proliferation was calculated as the ratio of BrdU-positive nuclei over total DAPI-stained nuclei  
10 and expressed as % of proliferation in ctrl condition. Bar scale represents 20 μm. **B)** HUVEC  
11 transmigration through an artificial membrane toward EGM-2 medium supplemented or not (+)  
12 with 100μM NaHS, 10 μL/mL of Gel-Ctrl or Gel-H<sub>2</sub>S for 6h. Data are mean ± SEM of calcein-  
13 AM fluorescence signal measured on a fluorescence plate reader ( $\lambda_{ex} = 495 \text{ nm}$ ;  $\lambda_{em} = 517 \text{ nm}$ ).  
14 Scale bar represents 50 μm. All data are scatter plots with mean ± SEM. \*P<0.05, \*\*P<0.01,  
15 \*\*\*P<0.001 vs ctrl<sup>(+)</sup> as determined by one-way ANOVA with post-hoc t-test with Dunnet's  
16 correction for multiple comparisons.  
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## DISCUSSION AND CONCLUSIONS

In this work, we developed and evaluated the therapeutic potential of a new H<sub>2</sub>S-releasing hydrogel to limit the development of IH in human veins. Previous studies in animal models have reported protection from IH with exogenous NaHS administration in rats<sup>39</sup>, rabbits<sup>40</sup> and mice<sup>41,42</sup>. However, human evidence of H<sub>2</sub>S donor efficacy against IH was lacking. Here, we report, for the first time in human tissue, that an exogenous H<sub>2</sub>S donor inhibits VSMC proliferation and IH in an *ex-vivo* model of human vein culture. We further demonstrate the efficacy against IH of a novel peptide hydrogel with sustained release of low dose of H<sub>2</sub>S.

H<sub>2</sub>S delivery via small molecule donors is often limited by short release periods, low water solubility, and even toxicity<sup>12</sup>. Controlling the amount of H<sub>2</sub>S released is critical as relatively high doses of exogenous H<sub>2</sub>S (over 500-1000 ppm) lead to respiratory distress and death, hindering the use of H<sub>2</sub>S medications in humans. H<sub>2</sub>S donors release H<sub>2</sub>S by either hydrolysis or in response to a specific trigger, such as a thiol or other nucleophiles<sup>12</sup>. Here, we employed a thiol-triggered donor motif, which adds a level of control to the release and ensures more sustained release compared to passive hydrolysis. In addition, the peptide we developed, based on an aromatic peptide amphiphile, is highly soluble and self-assembles to form long nanoribbons stabilized by  $\beta$ -sheets, which results in slow H<sub>2</sub>S release compared to the salt NaHS, as evidenced by H<sub>2</sub>S release profiles showing steady release in the range of hours, in stark contrast to the instantaneous release of H<sub>2</sub>S from NaHS. Importantly, Pep-H<sub>2</sub>S reduces IH at a 10-fold lower total sulfide dose than NaHS, which is likely due to the slower release kinetic, leading to better H<sub>2</sub>S bioavailability. In addition to reduced toxicity, a sustained release strategy is crucial for the prevention of IH in patients because the acute stage of IH development typically occurs during the first 30 days following the intervention<sup>43</sup>.

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4 Local biodegradable sheaths, wraps, meshes, membranes, and cuffs have all been tested  
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6 for perivascular applications. However, these solid solutions adapt poorly to the elasticity of  
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8 vascular tissue. While solid forms are more stable over time, injectable semi-solid formulations,  
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10 in particular hydrogels, present exciting alternatives as they are easily positioned and provide  
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12 adequate coverage of the vessel <sup>44</sup>. Due to their ability to self-assemble into nanoribbons, both  
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14 Pep-H<sub>2</sub>S and Pep-Ctrl spontaneously form hydrogels at 1 wt. % in aqueous solution in the presence  
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16 of CaCl<sub>2</sub>. Both gels are soft as measured by rheology, as is typical of self-assembled peptide gels  
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18 at low concentrations. Gel-H<sub>2</sub>S provides extended release compared to Pep-H<sub>2</sub>S, with potentially  
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20 increased efficacy in reducing IH *in-vivo* <sup>43</sup>. While hydrogels offer an interesting alternative to  
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22 solid perivascular solutions, most current formulations involve the combination of a gel and a drug.  
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24 The H<sub>2</sub>S-releasing gel developed here has advantages over polymer-based gels because it is a fully  
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26 biodegradable single small molecule with no polydispersity, and it requires no additional covalent  
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28 crosslinking.  
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36 The protective effect of the H<sub>2</sub>S-releasing peptide against IH is probably largely imparted  
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38 by a direct inhibition of VSMC proliferation. Indeed, in line with previous reports <sup>41</sup>, we show that  
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40 Pep-H<sub>2</sub>S/Gel-H<sub>2</sub>S and NaHS specifically inhibit human VSMC proliferation and transmigration,  
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42 which are important features of pathogenic synthetic VSMCs involved in IH <sup>2</sup>. We further  
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44 observed that the H<sub>2</sub>S-releasing peptide and NaHS disrupt the normal cytoskeleton architecture of  
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46 VSMCs, as evidenced by a modified pattern of calponin and SM22 $\alpha$  immunostaining. Given the  
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48 prominent role of cytoskeleton dynamics and remodeling during mitosis and cell migration, this  
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50 disrupted pattern likely contributes to reduced VSMC proliferation and migration. Whether or not  
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52 the protection imparted by the donors is directly mediated by H<sub>2</sub>S remains unknown. S-  
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54 Aroylthiooxime compounds release H<sub>2</sub>S in the presence of thiols with intermediate formation of  
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4 thiocysteine (cysteine persulfide) <sup>24</sup>. Thus, the observed biological effects of Pep-H<sub>2</sub>S/Gel-H<sub>2</sub>S  
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6 may be attributable, at least in part, to cysteine persulfide or other related reactive sulfide species.  
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8 Further studies will be conducted to identify the mechanism underlying the effects of  
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10 H<sub>2</sub>S/persulfide on the VSMC cytoskeleton.  
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14 In contrast to VSMC, EC proliferation and transmigration is stimulated by Pep-H<sub>2</sub>S/Gel-  
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16 H<sub>2</sub>S, consistent with previous reports showing that exogenous H<sub>2</sub>S stimulates HUVEC  
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18 proliferation and migration *in vitro* <sup>27,45</sup> and has pro-angiogenic properties *in vivo* <sup>46,47</sup>. This feature  
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20 is of particular interest in the context of IH. Indeed, EC dysfunction and death during vascular  
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22 surgery plays a major role in the development of IH, and the pro-angiogenic effect of H<sub>2</sub>S might  
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24 accelerate endothelium recovery following vascular trauma <sup>2</sup>. Numerous reports have shown that  
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26 H<sub>2</sub>S increases NO synthesis and bioavailability in EC <sup>48</sup>. Interestingly, NO produced and released  
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28 in EC plays an important role in maintaining the quiescent contractile features of VSMC <sup>2</sup>, and  
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30 many therapies have been developed based on the use of NO donors. However, low tolerance and  
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32 uncontrolled hypotensive effects have plagued the therapeutic use of NO-releasing drugs <sup>48</sup>.  
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34 Further studies will focus on measuring the effects of Pep-H<sub>2</sub>S/Gel-H<sub>2</sub>S on NO production and  
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36 bioavailability. We believe that H<sub>2</sub>S donor-based therapies may hold stronger therapeutic potential  
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38 than NO and, given that some effects of H<sub>2</sub>S are NO-mediated, replace failed NO-based strategies.  
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46 Currently available local therapies, such as drug-eluting stents and balloons, are coated  
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48 with non-specific cytotoxic (paclitaxel) and cytostatic (sirolimus) drugs. These devices may  
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50 improve long-term vessel patency when compared with standard “bare” stents and balloons <sup>49,50</sup>.  
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52 However, their long-term effect on patients outcome remains unclear and recent evidence suggest  
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54 a negative outcome for paclitaxel-coated devices and increased rate of complications such as late  
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56 stent thrombosis, and delayed re-vascularization <sup>51</sup>. Thus, local perivascular application of an H<sub>2</sub>S-  
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4 releasing gel might provide a unique therapeutic opportunity, with benefits on both VSMCs and  
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7 ECs, without systemic toxicity. In future efforts, we will evaluate the therapeutic potential of the  
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10 perivascular application of our Gel-H<sub>2</sub>S at the site of vascular trauma following surgery in animal  
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12 models of IH. Overall, we propose that application of such H<sub>2</sub>S-releasing self-assembling peptide  
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14 hydrogels may constitute a viable solution to limit IH in human vein grafts.  
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21 **Data Availability:** The raw/processed data required to reproduce these findings cannot be shared  
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23 at this time due to technical or time limitations  
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