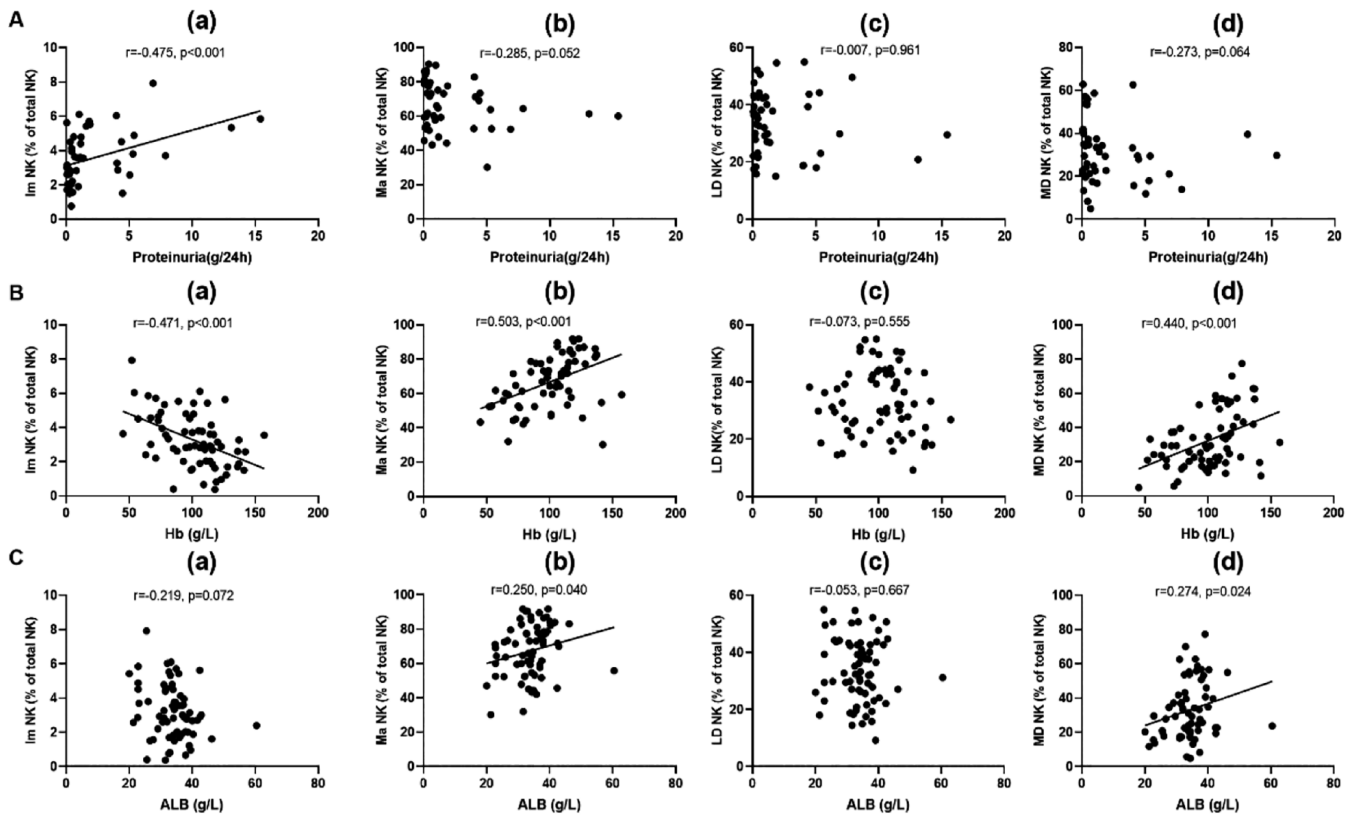


Supplementary Fig. S1. Correlation between NK cell subpopulations and SLE disease activity. Correlation between NK cell subpopulations and (A) SLEDAI-2K score ($n=68$; Spearman's rank correlation test) and (B) serum C3 level ($n=68$; Spearman's rank correlation test).

C: Comparison of NK cell subpopulations among different serum anti-dsDNA titres. Based on the serum anti-dsDNA antibody level, patients with SLE were grouped into negative (Neg; ≤ 20 IU/mL; $n=18$), lowly positive (Low; 20–200 IU/mL; $n=27$), and highly positive (High; >200 IU/mL; $n=22$) (Kruskal-Wallis H-test) groups.

D: Comparison of NK cell subpopulations among different serum C4 levels. Based on the serum C4 level, patients with SLE were grouped into low (≤ 0.1 g/L; $n=31$) and high (>0.1 g/L; $n=37$) (Mann-Whitney U-test) groups.

C3: complement C3; C4: complement C4. * $p<0.05$, ** $p<0.01$, *** $p<0.001$.



Supplementary Fig. S2. Correlations between NK cell subpopulations and clinical features of SLE. Correlations between NK cell subpopulations and (A) proteinuria (n=50), (B) Hb (patients with SLE, n=67), and (C) ALB (n=68) levels (all: Spearman's rank correlation test). Hb: haemoglobin; ALB: albumin.