

Primers included (from 5' to 3'):

h-AQP1 (194 bp): F- ATTTTCTGGGTGGGCCATT, R- GGGCCAGACCCCTCTATT; m-AQP1 (124 bp): F- AGGCTTCAATTACCCACTGGA, R- GTGAGCACCCTGATGTGA;

h-AQP2 (137 bp): F- CAGTCCTGGCATCTCTTGT, R- CCTTTGCCTCCCTAACCTATC; m-AQP2 (137 bp): F- ATGTGGGAACCTCCGGTCCATA, R- ACGGCAATCTGGAGCACAG;

h-AQP3 (107 bp): F- ACCCCTCTGGACACTTGGAT, R- GGGGTTGTTGTAGGGGTCAA; m-AQP3 (128 bp): F- GCTTTGGCTTCGCTGTCAC, R- TAGATGGCAGCTTGATCCAG;

h-AQP4 (124bp): F- TGGTGCAGCATGAATCCC, R- CTCATAAAGGCCACCAGCGA; m-AQP4 (199 bp): F- AGTCACCACGGTTCATGGAAA, R- CATGCTGGCTCCAGTATAATTGA;

h-AQP5 (224 bp): F- CACGTATGAGCCTGACGAGG, R- CCCCTCTCTAACTGTGCAGC; m-AQP5 (220 bp): F- AGAAGGAGGTGTGTTCAGTTGC, R- GCCAGAGTAATGGCCGGAT;

h-AQP8 (126 bp): F- TGCCTGTCGGTCATTGAGAA, R- CGCAGGGTTGAAGTGTCCA; m-AQP8 (145 bp): F- TGTGTAGTATGGACCTACCTGAG, R- ACCGATAGACATCCGATGAAGAT;



Figure S1 Establishment of renal IRI model. Proper anesthesia was achieved by intra-peritoneal injection of pentobarbital into mice. Both kidneys were exposed along the dorsal incision. After being dissociated, both renal pedicles were clamped with clips simultaneously for 30 minutes. The clips were then removed, and the wound was sutured. IRI, ischemia-reperfusion injury.

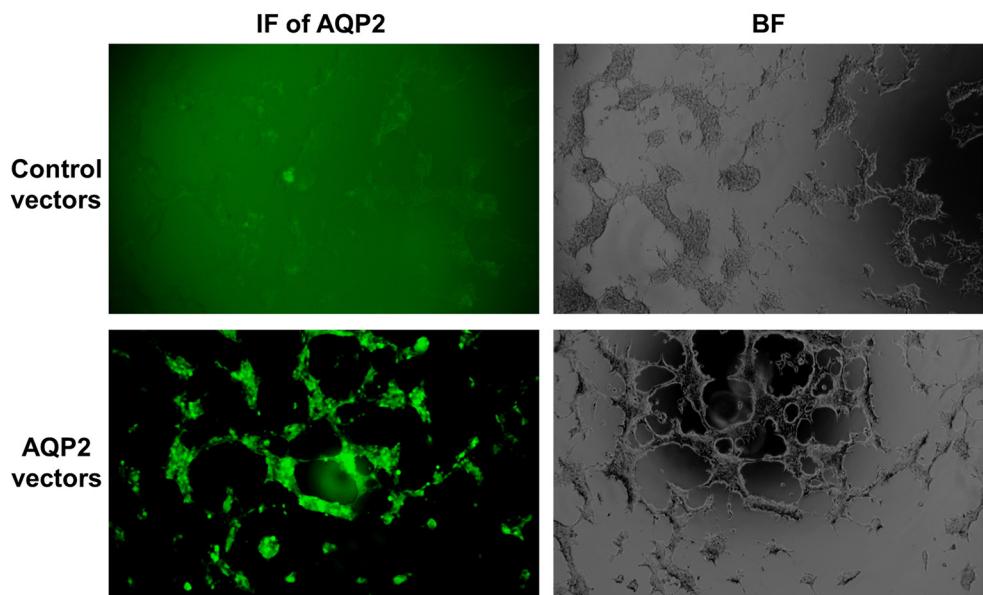


Figure S2 Measurement of AQP2 vectors. The titres of the AQP2 and control vectors were 2.2×10^5 tu/mL and 2×10^5 tu/mL, respectively. AQP, aquaporin.