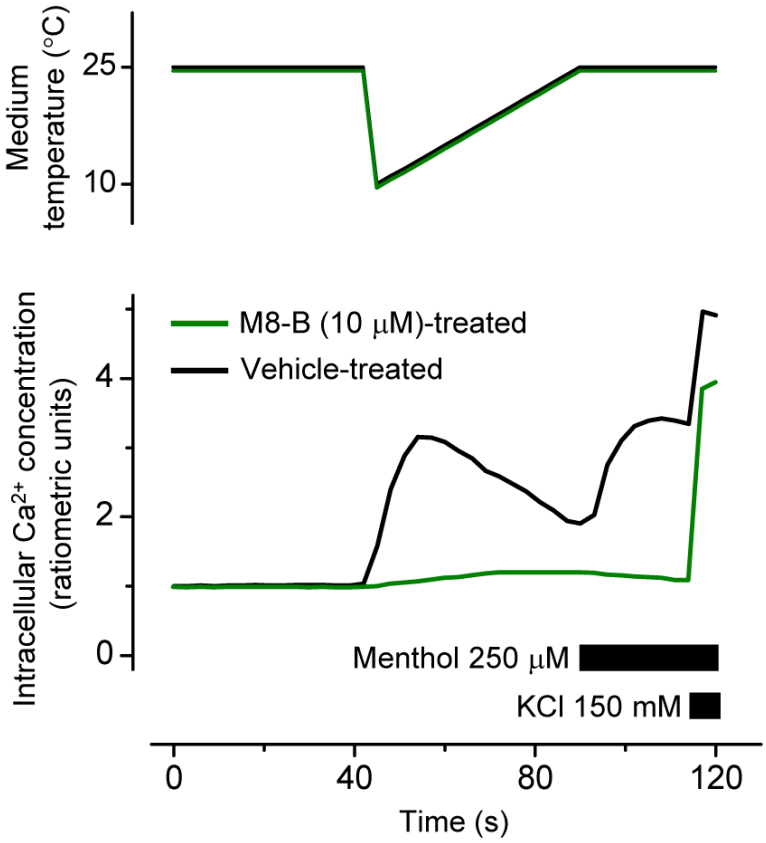
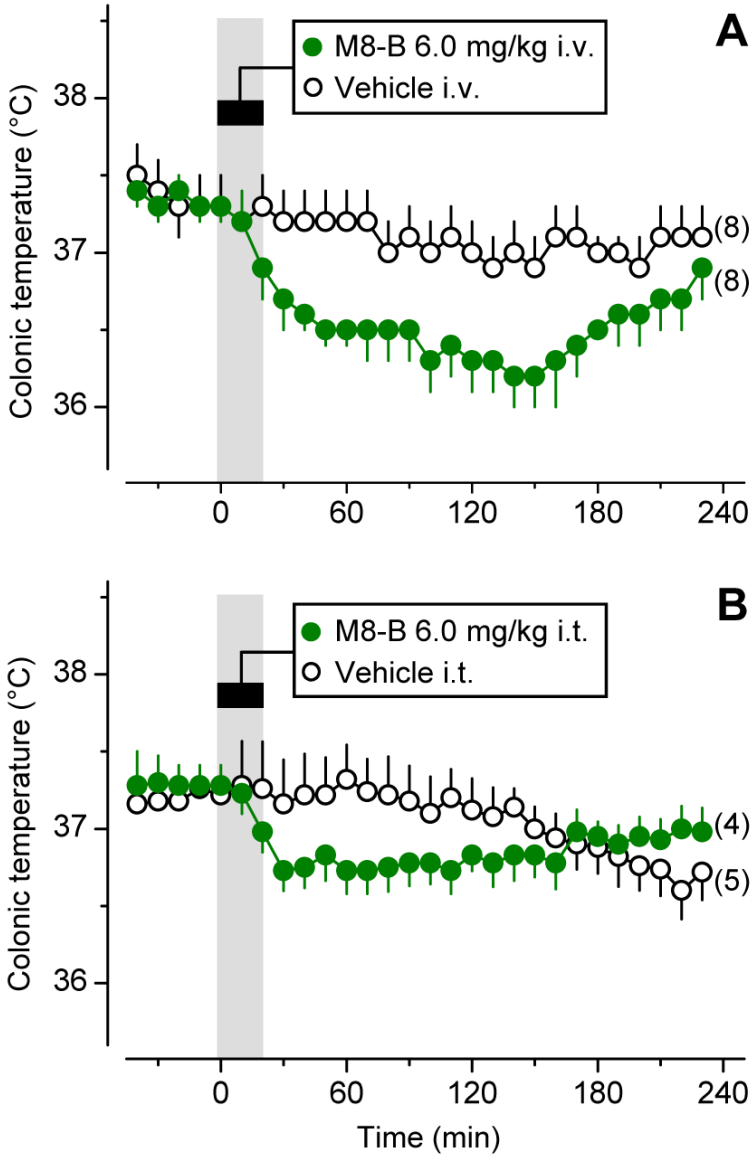
Supplemental Figures

M. Camila Almeida, Tamara Hew-Butler, Renato N. Soriano, Sara Rao, Weiya Wang, Judy Wang, Nuria Tamayo, Daniela L. Oliveira, Tatiane B. Nucci, Prafulla Aryal, Andras Garami, Diana Bautista, Narender R. Gavva, and Andrej A. Romanovsky

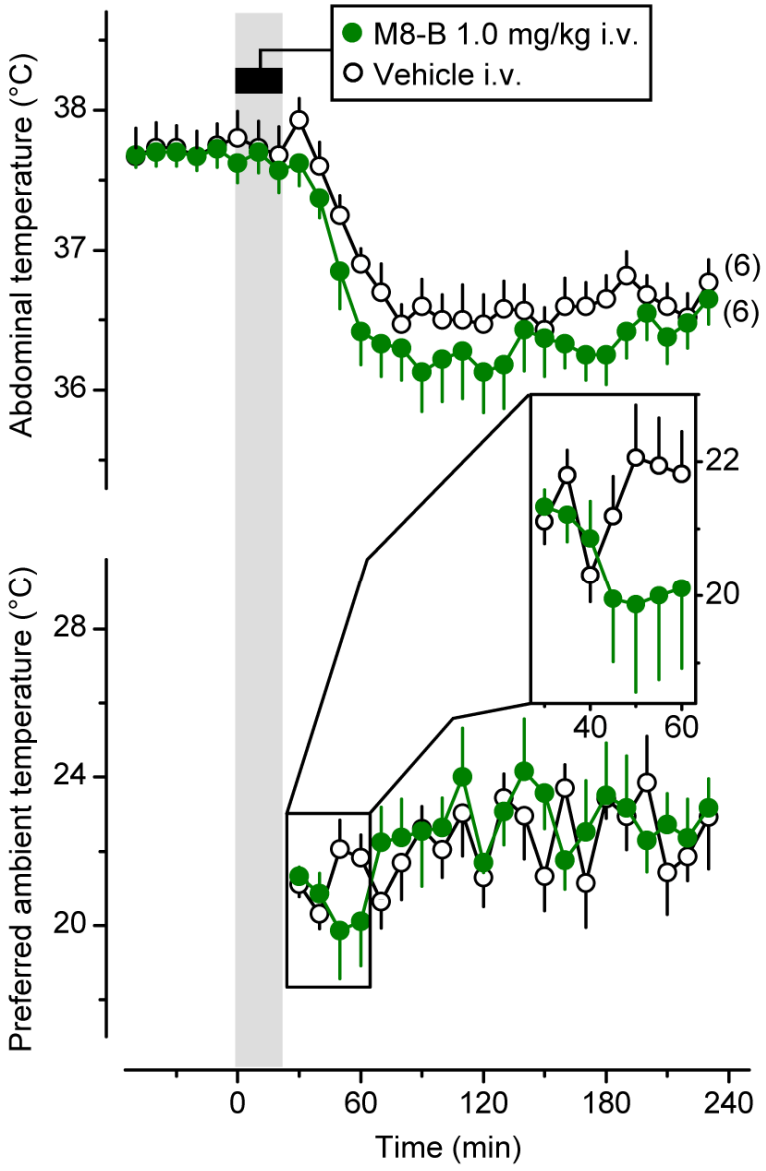
These are supplemental Figures 1, 2, and 3 for the article: Almeida, M. C., Hew-Butler, T., Soriano, R. N., Rao, S., Wang, W., Wang, J., Tamayo, N., Oliveira, D. L., Nucci, T. B., Aryal, P., Garami, A., Bautista, D., Gavva, N. R., Romanovsky, A. A. (2012). Pharmacological blockade of the cold receptor TRPM8 attenuates autonomic and behavioral cold defenses and decreases deep body temperature. *J. Neurosci. 32*(6), 2086-2099.



Supplemental Figure 1. In the presence or absence of M8-B, cultured murine sensory neurons were exposed to cold followed by menthol and KCl (concentrations indicated). The medium temperature (upper panel) and responses of two representative neurons (Fura-2 ratiometric Ca^{2+} imaging, normalized F_{340}/F_{380} ratio; lower panel) are shown. Responses to cold and menthol did not occur in the presence of M8-B. Here and in supplemental Figures 2 and 3, times of infusion are shown with bars.



Supplemental Figure 2. The effect of intravenous (**A**) or intrathecal (**B**) administration of M8-B (or its vehicle) on deep (colonic) body temperature in rats. A high dose of M8-B (indicated) caused neither a deeper nor a longer decrease in colonic temperature when infused intrathecally as compared to intravenously. Experiments were conducted at a subneutral ambient temperature of 19°C. Here and in supplemental Figure 3, the number of experiments for each treatment is shown in parentheses.



Supplemental Figure 3. The effects of intravenous administration of M8-B on deep (abdominal) body temperature and preferred ambient temperature in rats. Following the intravenous infusion of M8-B (dose indicated) or its vehicle in a warm (32°C) environment, rats were placed in a thermogradient apparatus (15-30°C) and allowed to select their preferred ambient temperature. Even though M8-B-treated rats tended to select a lower ambient temperature for a short period of time immediately after their transfer to the thermogradient (see insert), there was no statistically significant difference between the two treatments in either the body temperature response or thermopreferendum.

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