Supplementary Fig. 1
Supplementary Fig. 1. Hemophagocytosis in the bone-marrow of ARDS mice.

Bone marrow sections, prepared 42 h after LPS administration in α-GalCer-sensitized mice, were stained with hematoxylin and eosin (H-E) and are shown at 1,000× magnification. White arrows highlight monocytes that have phagocytosed red blood cells.
Supplementary Fig. 2. Treatment with both ET and PSL did not affect the accumulation of Gr-1 positive monocytes in the alveolar space of ARDS mice.

Mice, injected with both α-GalCer and LPS intratracheally, were treated with PBS, PSL (0.4 mg/kg), ET (10 mg/kg), or both PSL (0.4 mg/kg) and ET (10 mg/kg) at 0 h and 24 h after LPS challenge. Lung leukocytes in BAL were prepared 42 h after LPS administration and were stained with FITC-anti-F4/80, PE-anti-CD11b, or APC-Gr-1 (Ly-6g and Ly6c) mAbs for flow cytometric analysis.
Supplementary Fig. 3

CD4 cells

CD8 cells

NK cells

NKT cells
Supplementary Fig. 3. Effect of ET and PSL combination treatment on lymphocyte accumulation in the lungs of ARDS mice.

Mice, injected with both α-GalCer and LPS intratracheally, were treated with PBS, PSL (0.4 mg/kg), ET (10 mg/kg), or both PSL (0.4 mg/kg) and ET (10 mg/kg) at 0 h and 24 h after LPS challenge. Lung leukocytes were prepared 42 h after LPS administration and were stained with FITC-anti-CD4, FITC-anti-CD8, PE-anti-NK1.1, or APC-anti-CD3 for flow cytometric analysis. The number of CD4, CD8, NK, and NKT cells is presented for each treatment. *p < 0.05, **p < 0.01, ***p < 0.001, n.s.: not significant, compared to PBS-treated mice at each point.
Supplementary Fig. 4. Treatment with high dose of PSL did not effect on the survival in ARDS mice.

Mice, injected with both α-GalCer and LPS intratracheally, were treated with two high doses of PSL (2.5 mg/kg and 5mg/kg) at 0 h and 24 h after LPS challenge. Survival rates were then monitored. Each group contains 6 mice.