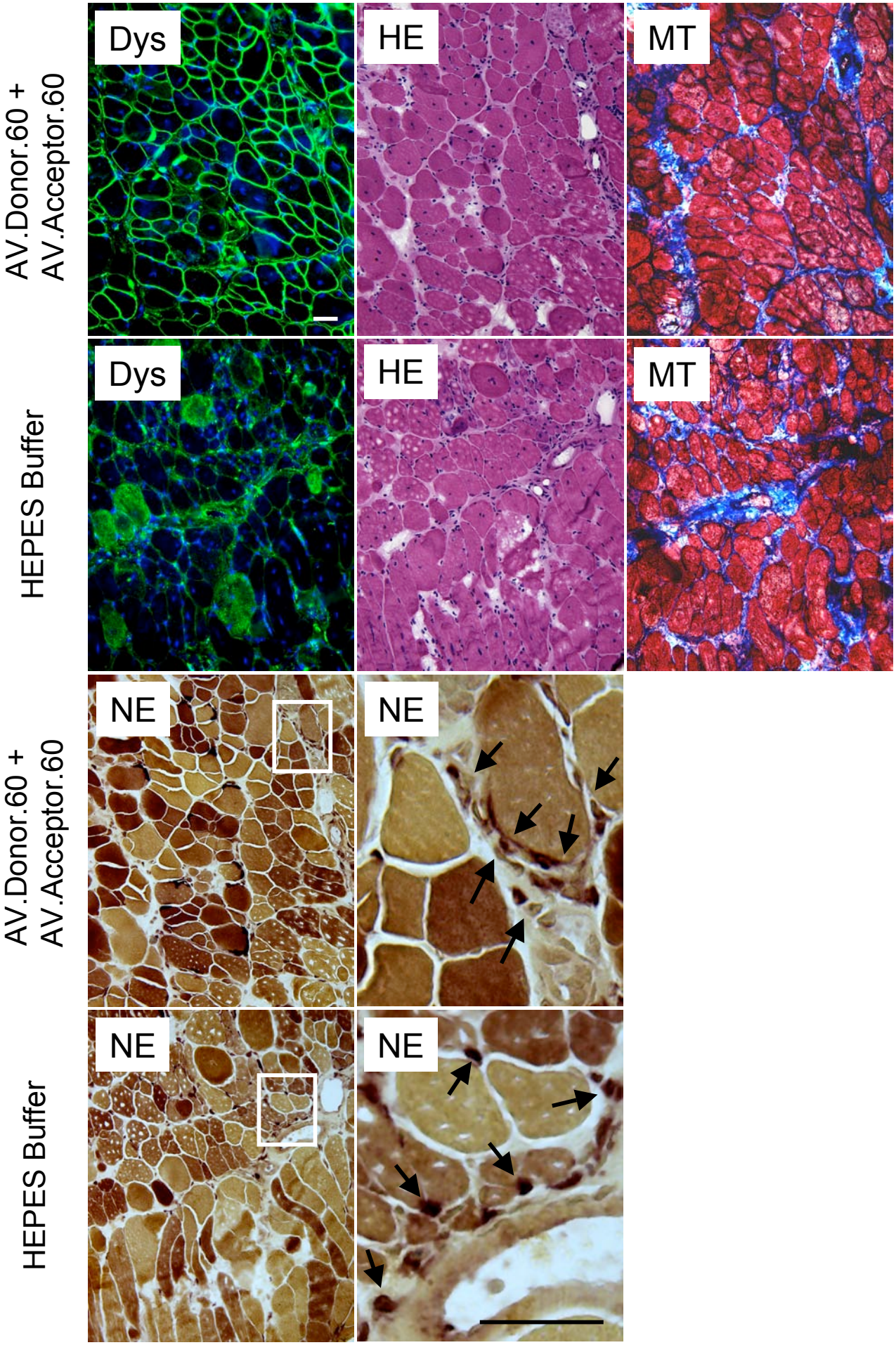
a


AV.Donor.60 +
AV.Acceptor.60
HEPES Buffer
AV.Donor.60 +
AV.Acceptor.60
HEPES Buffer
Dys
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NE
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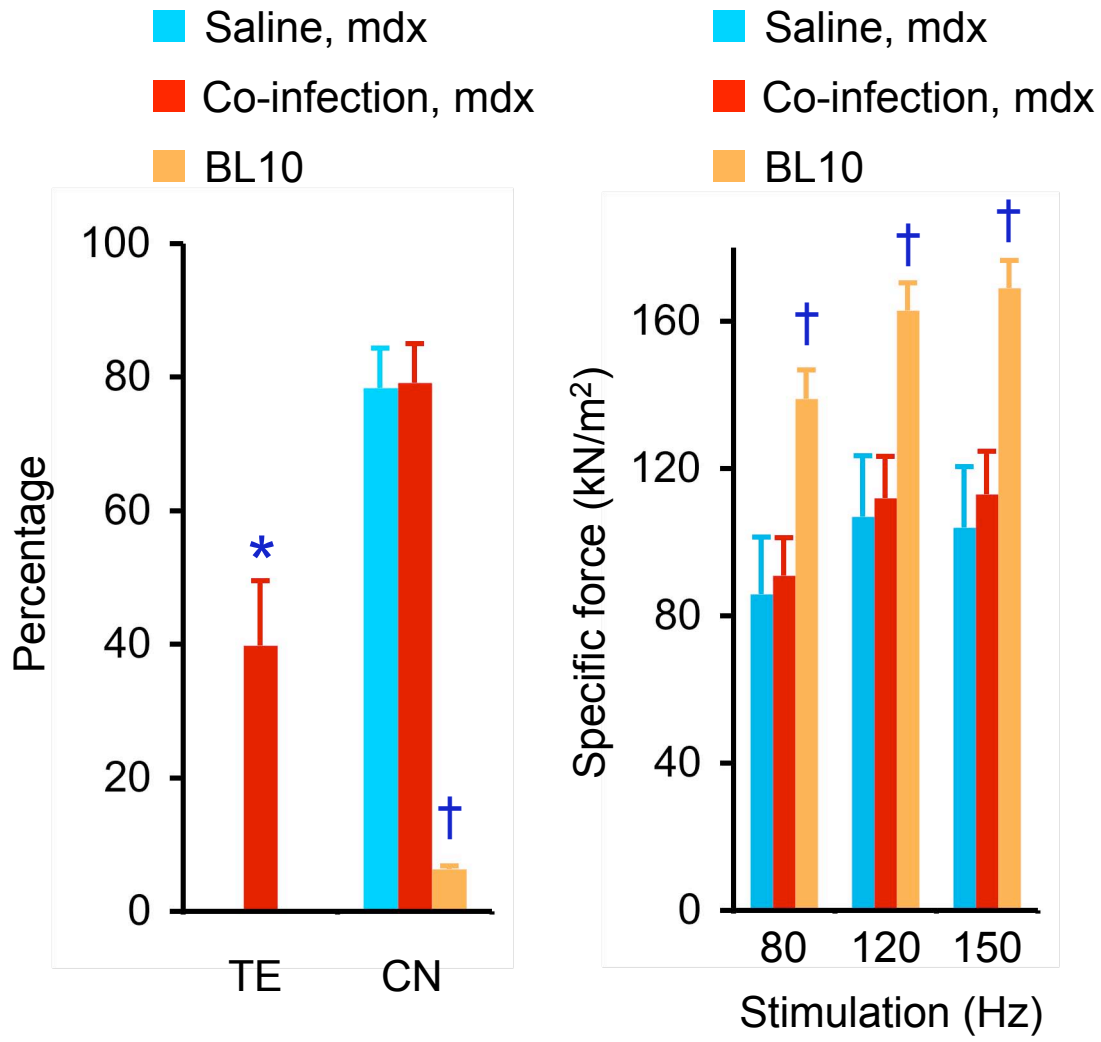
Supplementary Figure 5b;
Lai et al 2005

b



**Supplementary Figure 5. AV.Donor.60 and AV.Acceptor.60 co-infection in aged *mdx* EDL muscle does not reduce muscle pathology neither does it increase specific force.** The EDL muscles of 1-year-old *mdx* mice were co-infected with 1.5 x $10^{10}$ vg particles of AV.Donor.60 and AV.Acceptor.60 (7.5 x $10^{9}$ vg particles each). Transgene expression, muscle pathology and muscle physiology were examined at six months later. **a,** Representative photomicrographs of the EDL muscles either co-infected with *trans*-splicing AAV vectors, or mock infected with HEPES saline. Serial sections were stained for human dystrophin N-terminal domain (Dys), HE, Masson trichrome (MT) and nonspecific esterase (NE). A closer view of the boxed regions in low power nonspecific esterase staining was used to reveal macrophage infiltration (arrow) in both AAV treated and saline-treated muscles. Scale bar, 50 μm. **b,** Left panel, quantitative analysis of transduction efficiency ($n$ = 6 pairs, *mdx* muscle only) and central nucleation ($n$ = 4 pairs for *mdx* muscle, $n$ = 3 for BL10 muscle). TE, transduction efficiency; CN, central nucleation; Right panel, specific muscle force ($n$ = 3 for each group). Asterisk, the difference between co-infected muscle and mock-infected muscle was statistically significant according to paired $t$ test. Cross, the results in BL10 muscle were significantly different from that in *mdx* muscle (both AAV infected and mock treated) according to oneway ANOVA and Bonferromi *post hoc* test.