

Figure S1 Examination on specificity of primary antibodies used for immunohistochemical staining of paraffin-embedded human pancreas obtained from patients with fulminant type 1 diabetes. Sections stained with monoclonal antibodies for CD8, CXCR3, VP1, macrophages (CD68), MHC class II, MHC class I, CXCL10, interferon (IFN)-gamma and dendritic cells (CD11c) (left) compared to concentration matched isotype immunoglobulins, normal goat serum, normal rabbit IgG or without primary antibodies (right) (staining for CD8, CXCR3, CD68 and CD11c: $\times 200$, others: $\times 400$).

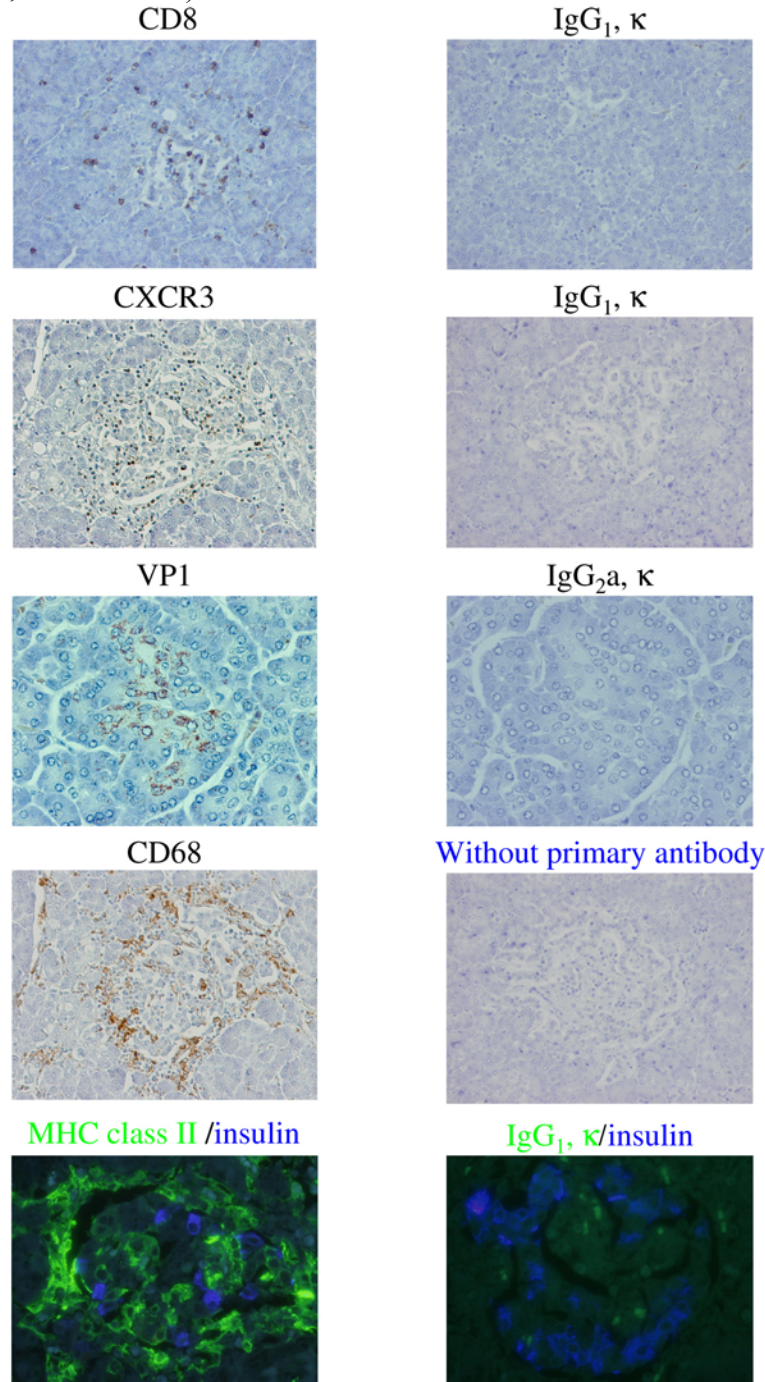


Figure S1

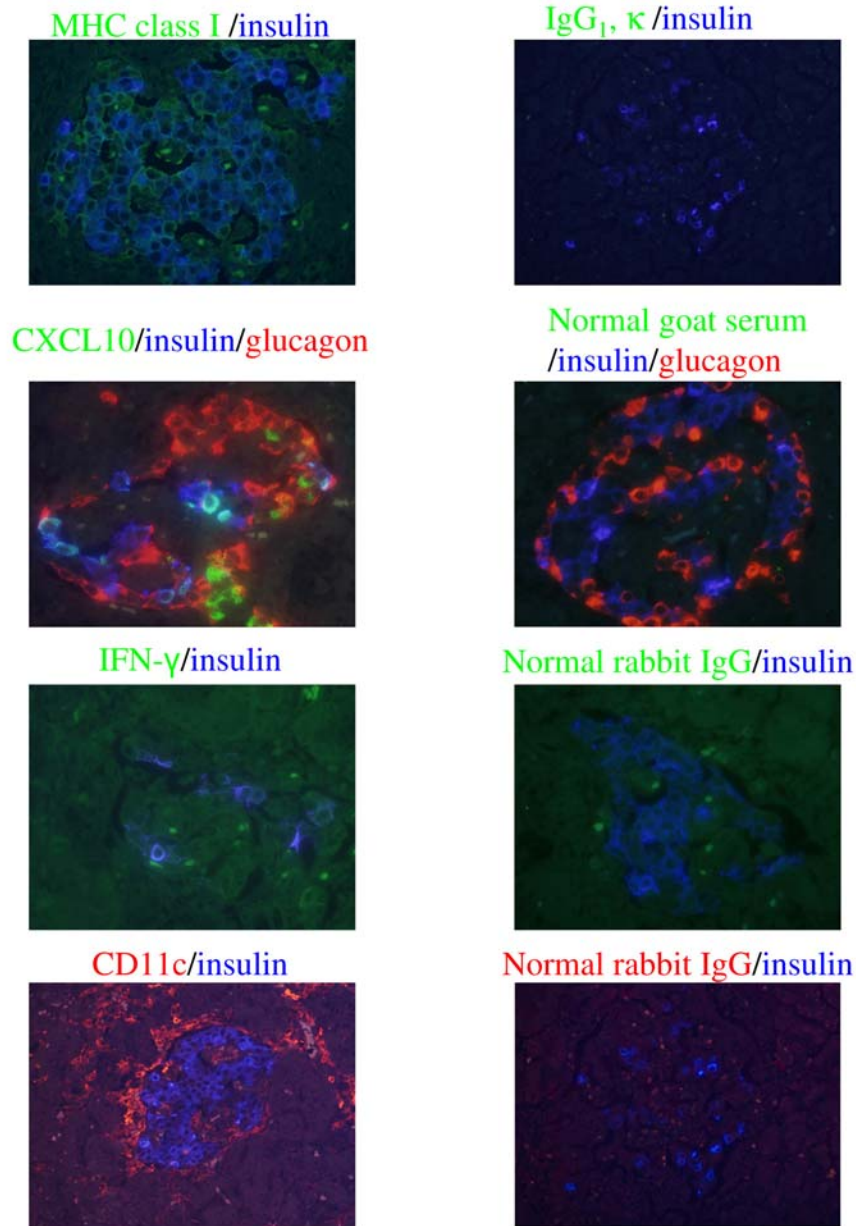


Figure S1(continued)

Figure S2 Hematoxylin and eosin (HE) staining (a), staining for VP1 (b), triple immunostaining for CXCL10, interferon (IFN)-gamma and insulin (c) of the pancreas of the patient with active pancreatitis ($\times 200$). No cells showing positive results for VP1, CXCL10 or IFN-gamma were observed.

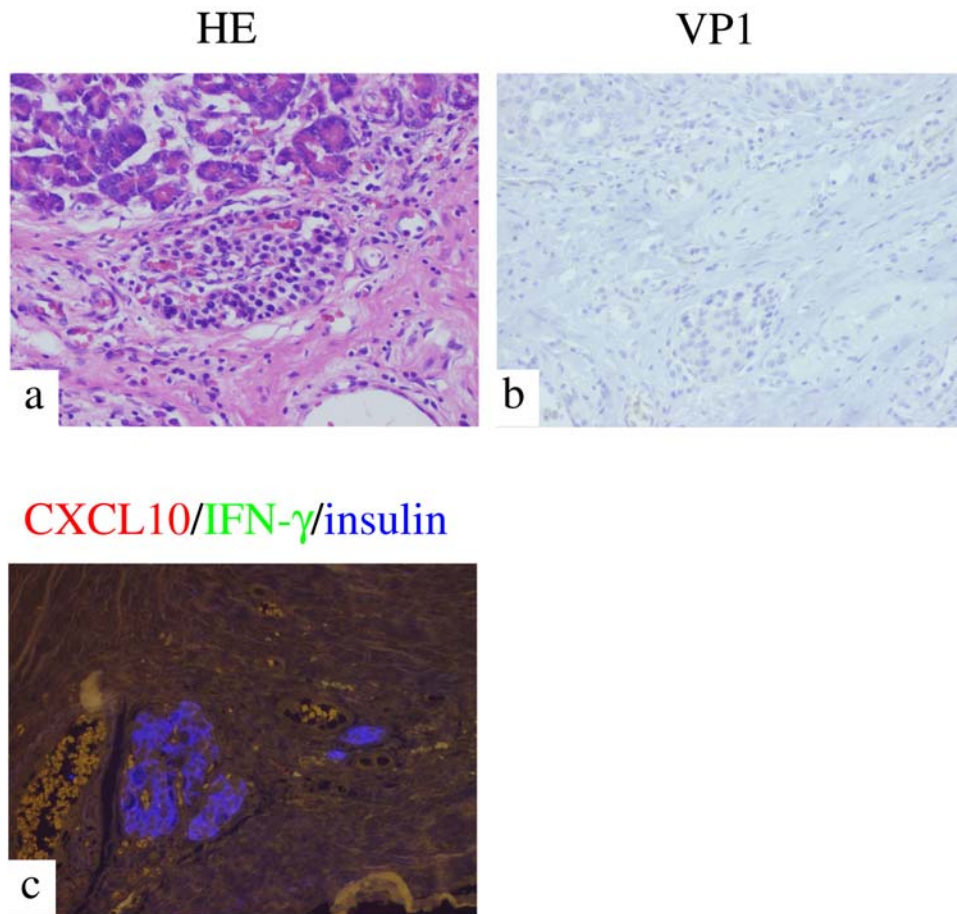


Figure S2

Figure S3 Some VP-1-positive acinar cells (a, brown) were surrounded by macrophages (b, brown) ($\times 200$, serial section, Case 2).

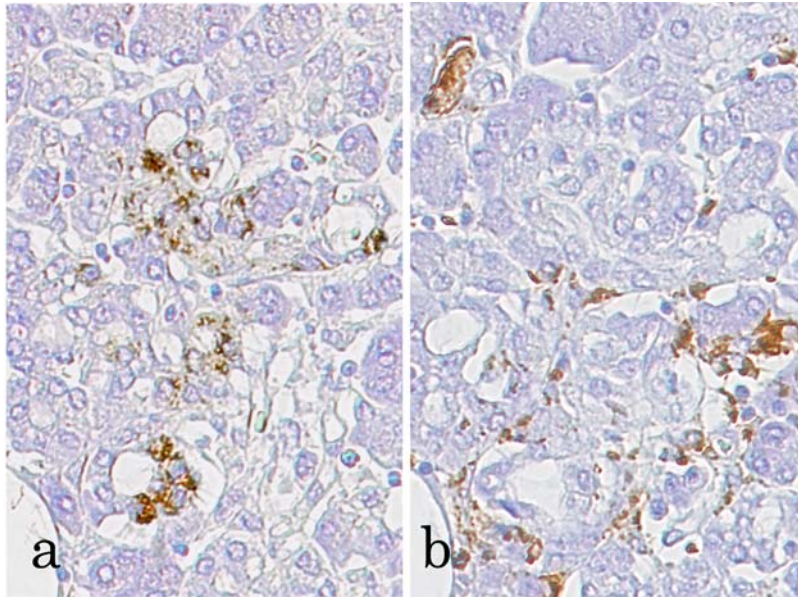


Figure S3

Figure S4 No CXCL10 expression is shown in a section from a non-diabetic control pancreas. a) CXCL10; b) insulin; c) glucagon; d) merged ($\times 400$).

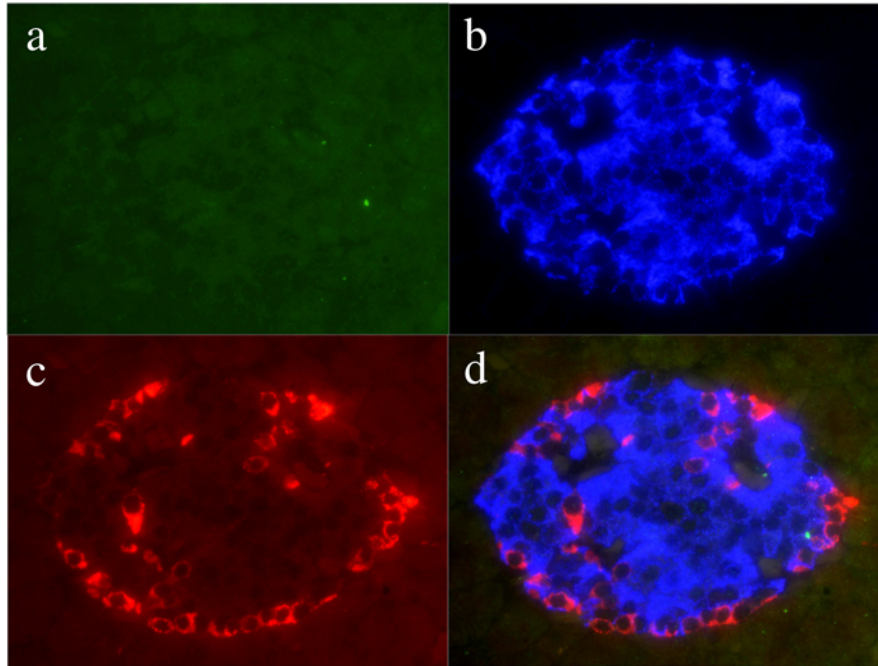


Figure S4

Figure S5 Immunohistochemical staining of the pancreas from a patient with slowly progressive type1 diabetes. a) CD8+ T cell (brown) infiltration in islets (arrows) and around the islets ($\times 200$). b) The volume of beta-cells (brown) was decreased (serial sections with a). No expression of CXCL10 was observed (c) in beta-cells (d) and alpha-cells (e). (f): Merged image of (c), (d) and (e) ($\times 400$).

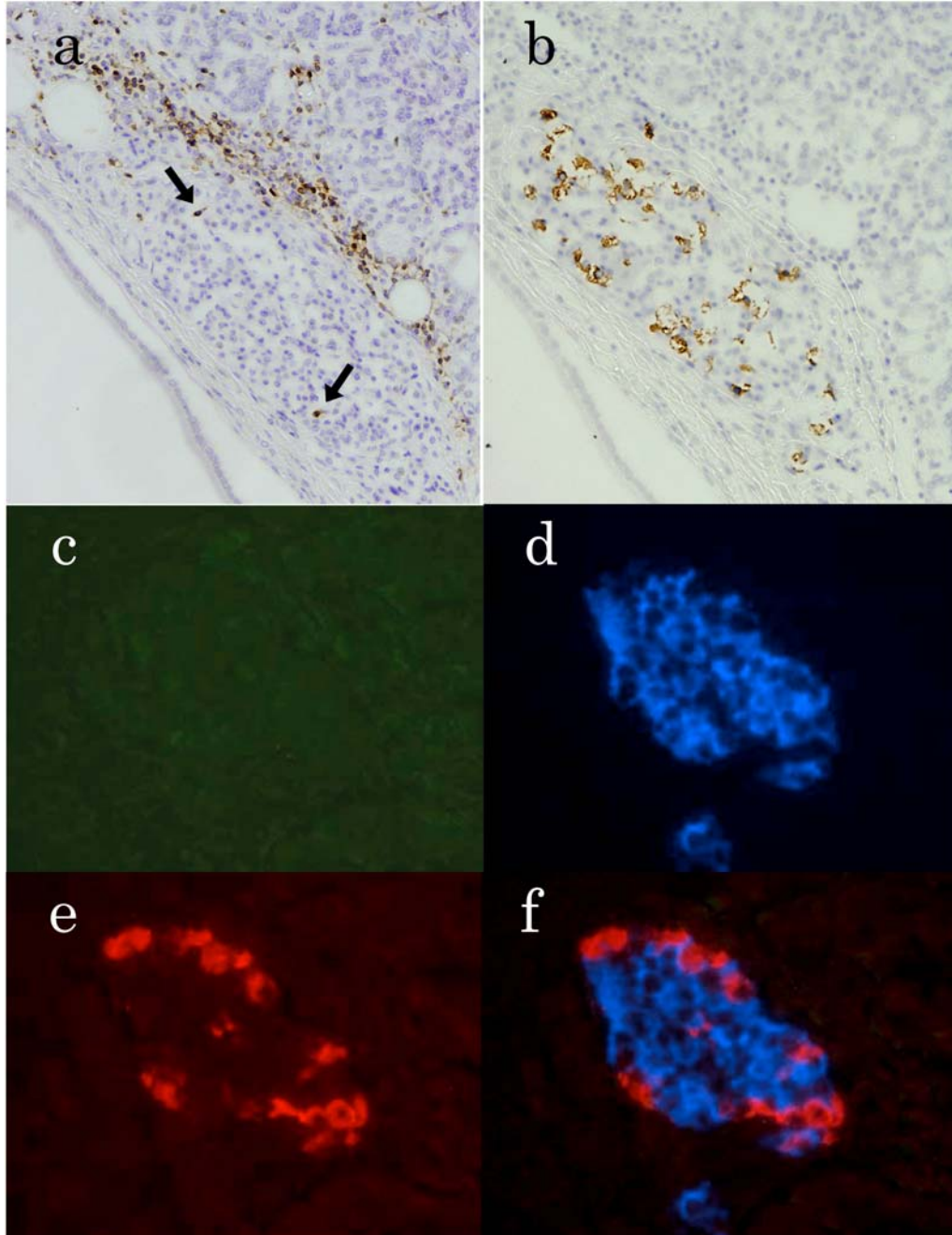


Figure S5