

***Supplementary Information for:***

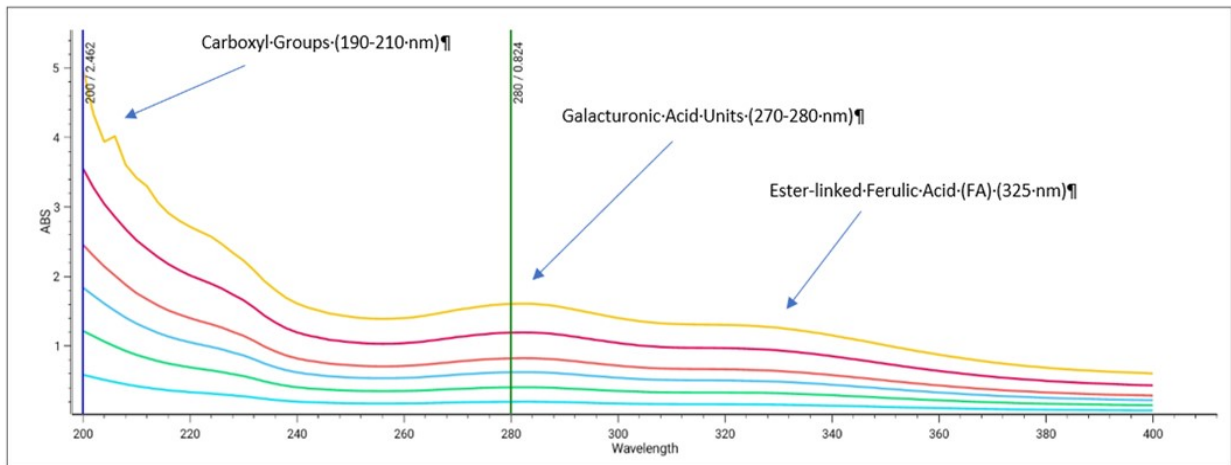
**Citrus Pectin-Coated Inhalable PLGA Nanoparticles for  
Treatment of Pulmonary Fibrosis**

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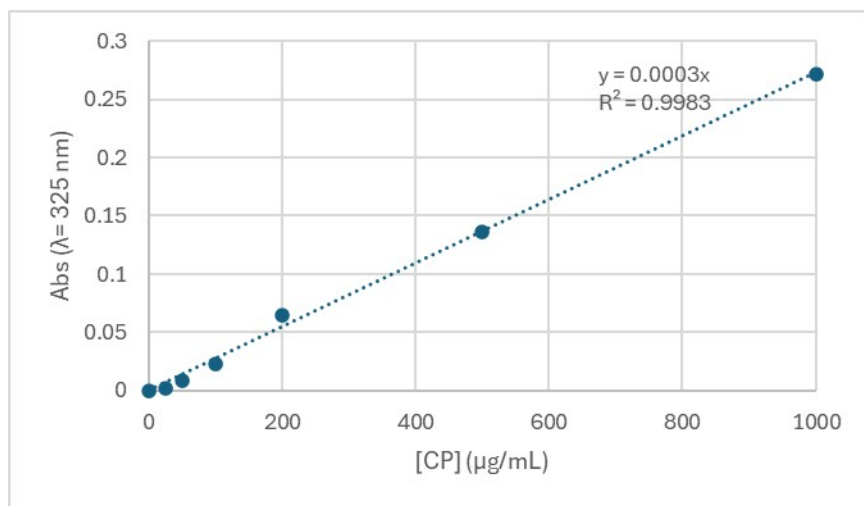
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**Table S1** Primer sequences used for RT-PCR.

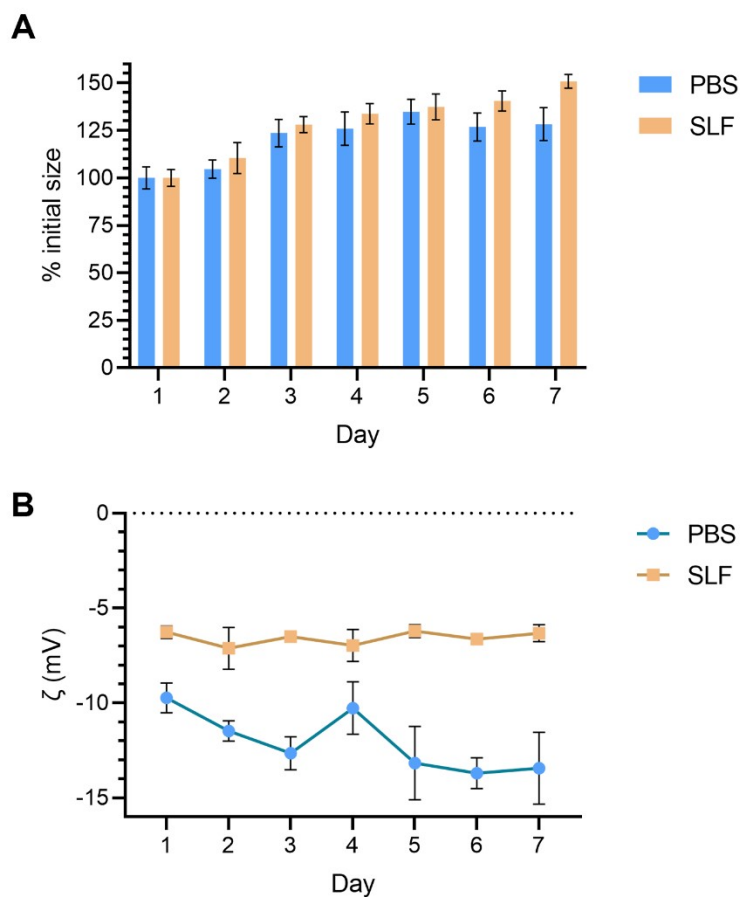
<b>Experiments</b>	<b>Gene</b>	<b>Primers</b>
<i>In vitro</i> (human)	COL1A1	F: GAGGGCCAAGACGAAGACATC R: CAGATCACGTCATCGCACAAC
	COL3A1	F: CCACTTGGGATTGCTGGGAT R: GGACCACGTTCTCCACTGAG
	FN1	F: CGGTGGCTGTCAGTCAAAG R: AAACCTCGGCTTCCTCCATAA
<i>In vivo</i> (mouse)	ACTA2	F: GTCCCAGACATCAGGGAGTAA R: TCGGATACTTCAGCGTCAGGA
	COL1A1	F: GCTCCTCTTAGGGGCCACT R: CCACGTCTCACCATTGGGG
	FN1	F: ATGTGGACCCCTCCTGATAGT R: GCCCAGTGATTTCAAGCAAAGG
	LGALS3	F: AGACAGCTTTTCGCTTAACGA R: GGGTAGGCACTAGGAGGAGC



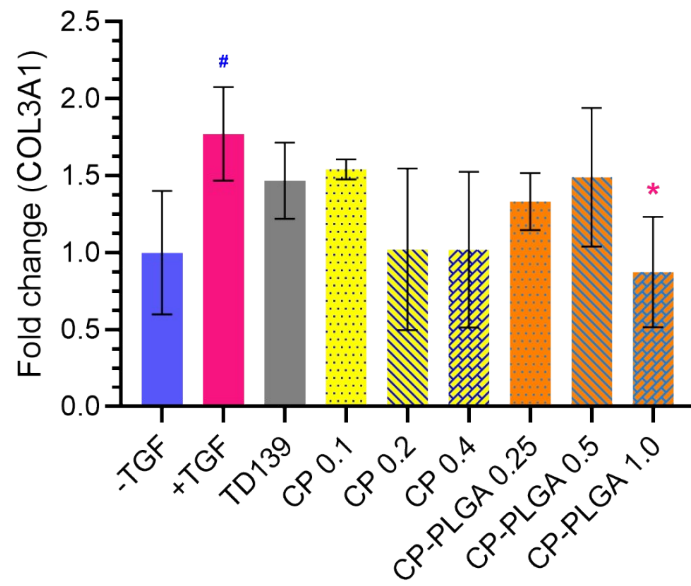
**Fig. S1** Graph of UV-Vis spectrophotometric spectral wavelength scan of citrus pectin at 0.25- (light blue), 0.5- (green), 0.75- (blue), 1 (orange), 1.5- (purple), and 2 mg/mL (yellow) concentrations (ascending spectra) from  $\lambda = 200$ -400 nm.



**Fig. S2** Calibration plot used for quantification of CP in CP-PLGA NPs, using wavelength identified from S1 above.



**Fig. S3** Results of nanoparticle stability assessment in phosphate buffered saline (PBS; pH 7.4) and simulated lung fluid (SLF), with respect to **A**) size and **B**) zeta potential ( $\zeta$ ). Some swelling of the CP-PLGA NPs was observed over 7 days in both media, while zeta potential tended to remain stable in SLF or get stronger in PBS over the same period.



**Fig. S4** Results of RT-PCR quantification of COL3A1 in MRC-5 cells subjected to treatment as in Fig. 6 in main text. Statistically significant downregulation of COL3A1 compared to the +TGF-only group was observed at only 1.0 mg/mL CP-PLGA (indicated by red asterisk). (\*/#  $P \leq 0.05$ ;  $n=3$ ).