

1 AN INTEGRATIVE BIOLOGY APPROACH TO QUANTIFY THE BIODISTRIBUTION OF  
2 AZIDOHOMOALANINE *IN VIVO*

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11 **Running Title:** Quantification of Aha Biodistribution

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13

15 **Abstract**

16 Identification and quantitation of newly synthesized proteins (NSPs) are critical to understanding  
17 protein dynamics in development and disease. Probing the nascent proteome can be achieved using non-  
18 canonical amino acids (ncAAs) to selectively label the NSPs utilizing endogenous translation machinery,  
19 which can then be quantitated with mass spectrometry. Since its conception, ncAA labeling has been  
20 applied to study many in vitro systems and more recently the in vivo proteomes of complex organisms such  
21 as rodents. In vivo labeling is typically achieved by introducing ncAAs into diet, which requires extended  
22 labeling times. We have previously demonstrated that labeling the murine proteome is feasible via injection  
23 of azidohomoalanine (Aha), a ncAA and methionine (Met) analog, without the need for Met depletion.  
24 With the ability to isolate NSPs without applying stress from dietary changes, Aha labeling can address  
25 biological questions wherein temporal protein dynamics are significant. However, accessing this temporal  
26 resolution requires a more complete understanding of Aha distribution kinetics in tissues. Furthermore,  
27 studies of physiological effects of ncAA administration have been limited to gross observation of animal  
28 appearance. To address these gaps, we created a deterministic, compartmental model of the biokinetic  
29 transport and incorporation of Aha in mice. Parameters were informed from literature and experimentally.  
30 Model results demonstrate the ability to predict Aha distribution and labeling under a variety of dosing  
31 paradigms and confirms the use of the model as a tool for design of future studies. To establish the suitability  
32 of the method for in vivo studies, we investigated the impact of Aha administration on normal physiology  
33 by analyzing the plasma metabolome following Aha injection. We show that Aha administration does not  
34 significantly perturb cellular functions as reflected by an unchanged plasma metabolome compared to non-  
35 injected controls.

36 **Keywords:** Non-canonical amino acids, protein labeling, kinetics, compartment modeling, metabolomics

37

38 **Abbreviations:** Aha, azidohomoalanine; HCA, hierarchical clustering analysis; hpi, hours post injection;  
39 KEGG, kyoto encyclopedia of genes and genomes; KNN, k-nearest neighbor; LC-MS/MS, liquid  
40 chromatography tandem-mass spectrometry; LHS, Latin hypercube sampling, Met, methionine; MRM,  
41 multiple reaction monitoring; ncAA, non-canonical amino acid; NSP, newly synthesized protein; ODE,  
42 ordinary differential equation; PCA, principal component analysis, PRCC, partial rank correlation  
43 coefficient; rF, relative fluorescence; SEf, standard error of fitting; fAha, free Aha; pAha, proteinous Aha;  
44 Sysrv, systemic venous reservoir.  
45

## 46 **Author Summary**

47           As the machinery of life, proteins play a key role in dynamic processes within an organism. As  
48 such, the response of the proteome to perturbation is increasingly becoming a critical component of  
49 biological and medical studies. Dysregulation of protein mechanisms following exposure to experimental  
50 treatment conditions can implicate physiological mechanisms of health and disease, elucidate toxin/drug  
51 response, and highlight potential targets for novel therapies. Traditionally, these questions have been probed  
52 by studying perturbations in total proteins following an experimental treatment. However, the proteome is  
53 expansive and noisy, often an early response can be indiscernible against the background of unperturbed  
54 proteins. Here, we apply a technique to selectively label newly synthesized proteins, which enables  
55 capturing early changes in protein behavior. We utilize an amino acid analog that naturally incorporates  
56 into proteins, and investigate the tissue distribution, protein labeling efficiency, and potential physiological  
57 impact of this analog in mice. Our results demonstrate that we can reproducibly predict protein labeling and  
58 that the administration of this analog does not significantly alter in vivo physiology over the course of our  
59 experimental study. We further present a computational model that can be used to guide future experiments  
60 utilizing this technique to study proteomic responses to stimuli.

## 61 **Introduction**

62           The use of non-canonical amino acid (ncAA) labeling for selective identification of newly  
63 synthesized proteins (NSPs) in mammalian cells was first introduced by Dieterich et al. in 2006 (1) and has  
64 since been applied to study several biological systems (see reviews (2, 3)). In this technique, an ncAA,  
65 typically a methionine (Met) analog, is introduced to the biological system of interest and incorporated into  
66 newly synthesized polypeptide chains using endogenous or engineered cellular translational machinery  
67 Distinction of nascent proteins from the constituent proteome is enabled by reactive chemical groups, such  
68 as azides and alkynes, which can be covalently modified via azide-alkyne cycloaddition (a click chemistry  
69 reaction) (2). As such, ncAA-labeled NSPs can be selectively conjugated to affinity or fluorescent tags for  
70 identification or visualization, respectively (1, 4). This technique has been successfully employed to probe  
71 protein dynamics in a variety of bacterial (5-7) and mammalian cells *in vitro* (8-10), as well as model  
72 organisms *in vivo*, including zebrafish (11) and *Xenopus* (12). More recently, ncAA labeling has also been  
73 shown to be effective in identifying NSPs in rodents (13-15). The expanding applications of ncAA labeling  
74 will enable previously inaccessible biological questions, wherein understanding the temporal dynamics of  
75 protein synthesis and turnover is critical, to be addressed.

76           For rodent proteome labeling, dietary administration of ncAA, typically enhanced with a Met-free  
77 diet, has been shown to achieve adequate labeling efficiency (13, 16). However, Met deprivation may affect  
78 normal physiology, particularly over longer labeling periods. Notably, the presence of Met in mammalian  
79 diet is essential for normal embryonic development (17-19), which constrains this method to studies of  
80 adult animals. In this regard, our group has previously demonstrated that labeling the adult and embryonic  
81 murine proteome can instead be achieved via systemic injection of ncAAs without the need for Met  
82 depletion (14, 20). Compared to feeding with an ncAA-enriched diet, the injection method achieves global  
83 proteome labeling in a shorter period of time, which enables the detection of proteins synthesized shortly  
84 after injection and proteins with high turnover rates (20). In addition, injections allow for accurate dosing

85 calculations, which eliminates the inherent variability of the feeding method due to fluctuations in feeding  
86 patterns and intestinal absorption.

87 Despite the application of ncAA labeling in a number of studies to decipher complex cellular  
88 processes in animal models (13, 15, 16, 21), understanding of the kinetics of ncAA distribution in tissues,  
89 especially as it pertains to rates of protein incorporation and loss by degradation, is lacking. Determination  
90 of the timescale of ncAA uptake by tissues following administration and the lag time before maximum  
91 protein labeling are critical information for the design of robust temporal experiments to study the nascent  
92 proteome. Predicting ncAA pharmacokinetics in murine models will also enable optimizing the dosing  
93 regimen to attain the ideal concentrations to achieve sufficient protein labeling in the desired tissue over  
94 the course of the study.

95 In addition to the lack of knowledge of ncAAs distribution kinetics *in vivo*, evaluation of the  
96 physiological impact of ncAA administration to animals has been limited to examining changes in gross  
97 behavior, physical appearance and body weight (13-15). A more robust analysis of the effect of ncAA  
98 administration on the metabolome, and the corresponding implications for cellular function, is required to  
99 confirm the suitability of the method for *in vivo* studies.

100 The aim of this study was to characterize the distribution kinetics of azidohomoalanine (Aha), a  
101 widely used Met analog, in mice following subcutaneous injection, and to investigate the impact on normal  
102 physiology. To study the biodistribution of Aha, we measured the concentration in the plasma, liver, kidney,  
103 brain and skeletal muscle using liquid chromatography-tandem mass spectrometry (LC-MS/MS) over a  
104 period of 24 h. This dataset was used to develop a deterministic compartment model of small molecule  
105 biokinetics that characterizes the movement of freely diffusive Aha (fAha) throughout the mouse  
106 circulatory system and into tissues. In addition, we used fluorescent western blotting to measure protein  
107 labeling in these tissues during the same period of time. This second dataset was used to inform a model of  
108 relative protein labeling as a function of fAha availability to characterize both the predicted labeling profile

109 for a given experimental treatment of Aha and the relative synthesis and turnover rates of Aha-labeled  
110 proteins. We demonstrate that this model can be used to characterize nascent protein synthesis and turnover  
111 within distinct tissues. Furthermore, we validated the capability of this model to predict NSP labeling under  
112 more complex, multiple injection dosing paradigms, which can be a tool to guide the design of future  
113 experiments utilizing Aha labeling.

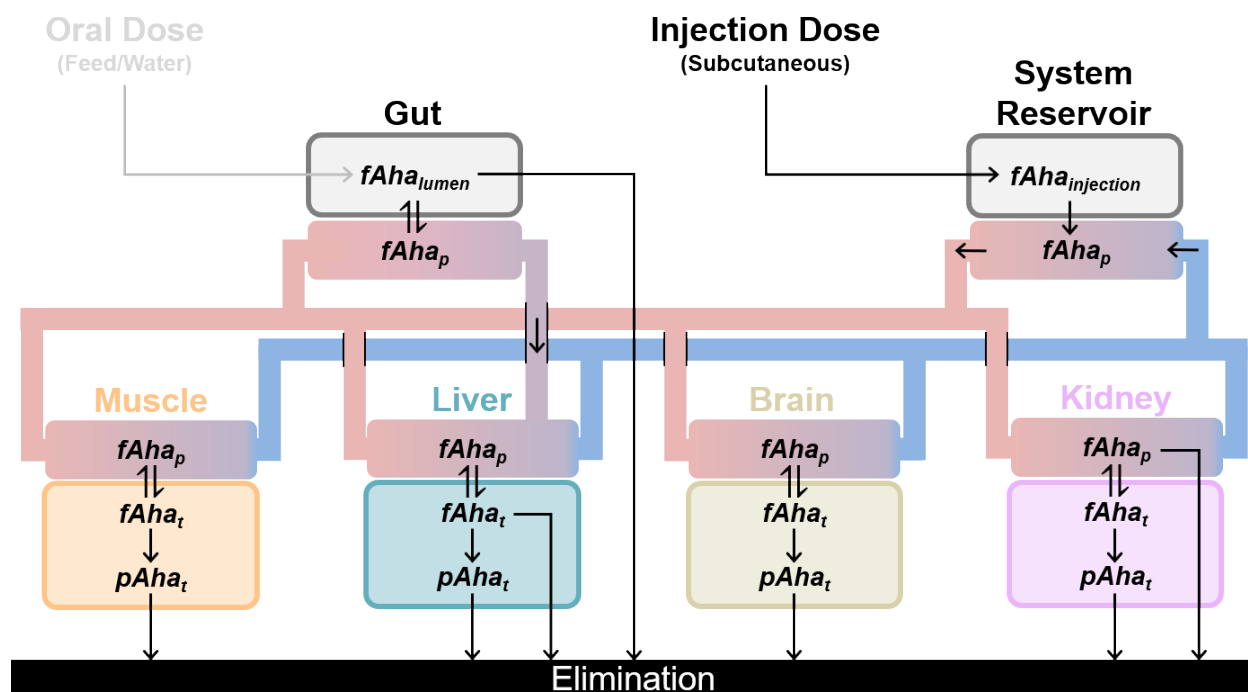
114 We also probed the effect of Aha incorporation into NSPs and investigated whether Aha labeling  
115 perturbs normal physiological functions. We compared the plasma metabolome 24 h after Aha injection to  
116 that of non-injected mice to identify if metabolic pathways were dysregulated due to protein labeling with  
117 Aha. Only ~ 1.3% of metabolites were differentially regulated in the injected mice, indicating that Aha  
118 administration does not have a significant impact on normal physiology. Taken together, these results  
119 provide a fundamental understanding of the interrelation between the distribution kinetics of the ncAA into  
120 murine tissues and the associated degree of protein labeling, as well as the impact of ncAA injection on  
121 physiological functions.

## 122 **Results and Discussion**

123 Effective protein labeling is critical to enrich Aha-labeled proteins with high signal-to-noise ratio  
124 for accurate quantitative MS measurements and identification of newly synthesized proteins. Depending on  
125 the tissue type and biological processes to be studied, multiple injections of Aha may be required to attain  
126 a high enough degree of labeling that results in a suitable MS signal. Therefore, optimizing the dose and  
127 frequency of Aha injections is critical for the appropriate design of labeling studies. In this regard, we  
128 sought to describe the distribution and labeling kinetics of Aha with an experimentally informed  
129 deterministic model. Our model was developed to describe: (1) the transport of freely diffusive Aha (fAha),  
130 Aha that is yet to be incorporated into protein, in the plasma, (2) the circulatory exchange of fAha into  
131 tissues of adult mice and (3) the degree of Aha incorporation into proteins (pAha) in specific tissues.

## 132 **Kinetic Model of Aha Biodistribution Describes Transport and Exchange**

133 To capture the dynamics of fAha distribution *in vivo*, an *in silico* model system of ordinary  
 134 differential equations (ODEs) was generated describing the physiological processes of small molecule  
 135 transport. Dosed fAha was introduced into the model at a non-localized reservoir, to mimic the injection  
 136 site of our subcutaneous dosing paradigm. From this reservoir, fAha enters the murine circulatory system,  
 137 at a rate that is a function of reservoir concentration and transport kinetics, and is distributed to distinct  
 138 tissue compartments (Figure 1).



139 Figure 1. Biodistribution of fAha via transport and exchange. Introduced at a distinct injection site, fAha is  
 140 allowed to enter the circulation at a systemic venous reservoir. Driven by circulation, fAha is passed through  
 141 the arterial system (red) into distinct tissue compartments where exchange occurs at tissue specific rates.  
 142 Arrows indicate directional movement of fAha. Each tissue compartment consists of two sub-  
 143 compartments: plasma available for surface exchange (red to blue gradient) and an intracellular volume  
 144 (illustrated here as the bottom compartments: from left to right muscle, liver, brain, and kidney). A  
 145 mechanism for oral dosing (via plasma exchange with the gastrointestinal lumen) is illustrated, but not  
 146 included in this model.

147  
 148  
 149 Within each compartment, the time-dependent rate of change of the fAha plasma concentration  
 150 ( $[fAha_p]$ ) available for exchange with each tissue can be described as a mass balance with two stages:  
 151 transport and exchange. The transport stage is governed by circulatory blood flow.



$$\left(\frac{d[fAha_p]_x}{dt}\right)_{transport} = \frac{Q_x}{V_x} ([fAha_p]_{sysrv} - [fAha_p]_x) \quad \text{Eq. 1}$$

152 where  $Q_x$  is the blood flow rate between tissue ‘x’ and a systemic venous reservoir (*sysrv*), and  $V_x$  is the  
 153 corresponding volume of plasma relevant to each tissue ( $Q/V$  represented as a lumped constant  $qb$  in  
 154 Supplements S2,S3). All kinetic parameters for circulatory transport were normalized by tissue mass to  
 155 compare relative perfusion rates between tissue compartments of differing size. Once localized to a tissue,  
 156 fAha in the plasma can also be exchanged across the cell membrane with the intracellular Aha concentration  
 157 ( $[fAha_i]$ ) and is described as follows:

$$\left(\frac{d[fAha_p]_x}{dt}\right)_{exchange} = k_{e,x}[fAha_t]_x - k_{i,x}[fAha_p]_x \quad \text{Eq. 2}$$

$$\left(\frac{d[fAha_t]_x}{dt}\right)_{exchange} = k_{i,x}[fAha_p]_x - k_{e,x}[fAha_t]_x \quad \text{Eq. 3}$$

158 where  $k_{i,x}$  and  $k_{e,x}$  are the tissue specific import and export rates ( $\text{min}^{-1}\cdot\text{mg}^{-1}$ ) for fAha across the cell  
 159 membrane. The liver tissue, gut and kidney plasma compartments were assigned additional system removal  
 160 terms ( $k_{r,x}$ , Supplements S2,S3) accounting for excretion and metabolization of fAha. The two stages of  
 161 distribution were combined into a single system of ODEs, parameterized and bound within reasonable  
 162 ranges for a model of small molecule pharmacokinetics (Supplements S2-S5) (22-25).

### 163 **Kinetic Model of Protein Labeling Captures Aha Incorporation**

164 Within each tissue compartment,  $fAha_i$  is incorporated into proteins via protein synthesis. As a Met  
 165 analog, Aha is able to bind to methionyl-tRNA synthase, albeit at a much slower rate ( $k_{cat}\cdot K_m^{-1}$  Aha:  $1.42\text{E-}3$ ,  
 166 Met:  $5.47\text{E-}1 \mu\text{M}^{-1}\cdot\text{s}^{-1}$ ) (26). Because the rate constant of Aha binding to the methionyl-tRNA synthase is  
 167 much slower than Met, and previous estimates of the amount of Aha incorporation into NSPs was less than  
 168 10% (14), we made a modeling assumption that  $[fAha_i]$  is negligibly depleted by incorporation into protein  
 169 (further justification, Supplement S2) and that recycling of Aha is nonexistent.

$$[fAha_t]_x \ll [pAha_t]_x \quad \text{Eq. 4}$$

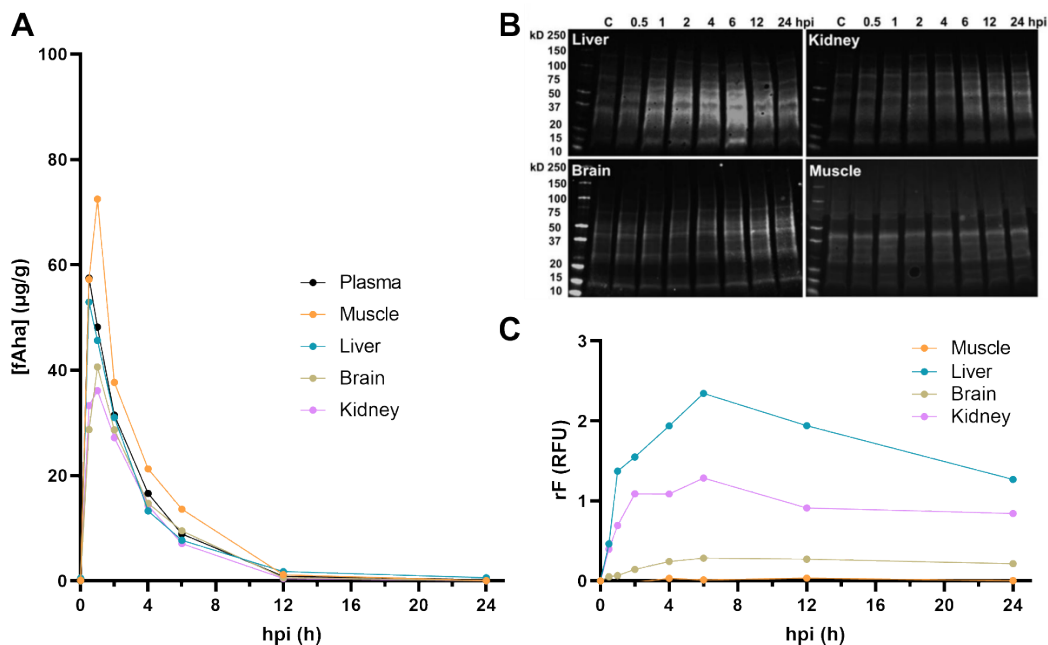
$$\left(\frac{d[fAha_t]_x}{dt}\right)_{\text{synthesis}} = -k_{s,x}[fAha_t]_x \approx 0 \ll \left(\frac{d[fAha_t]_x}{dt}\right)_{\text{transport}} \quad \text{Eq. 5}$$

$$\left(\frac{d[pAha_t]_x}{dt}\right)_{\text{synthesis}} = k_{s,x}[fAha_t]_x - k_{d,x}[pAha_t]_x \quad \text{Eq. 6}$$

170 where  $k_{s,x}$  and  $k_{d,x}$  are the tissue-specific (denoted for tissue ‘x’ as above) rate constants of incorporation of  
171 Aha into proteins due to synthesis and loss of Aha-labeled proteins due to degradation. These equations  
172 describing Aha labeling of proteins in each tissue were added to the biodistribution model establishing a  
173 time resolved predictive model of tissue-specific protein labeling given a variety of input dosing paradigms.

#### 174 **Experimental LC-MS/MS and Western Blotting Data Enables Parameter Fitting**

175 Model parameters were initialized and bound within reasonable ranges, informed from literature  
176 and experimental measurements as described in the methods (Supplements S3-5) (22-25), then underwent  
177 least squares regression to match experimentally measured data of Aha concentration and labeling. To  
178 inform fitting, fAha concentration profiles in plasma and tissues were determined by injecting Aha  
179 subcutaneously into mice at  $0.1 \text{ mg} \cdot \text{g}^{-1}$  total body weight and sacrificing 0.5-24 h post injection (hpi).  
180 Accurate identification of fAha in each tissue was performed using LC-MS/MS multiple reaction  
181 monitoring (Figure 2A). Additionally, the kinetics of Aha incorporation into tissue proteins were described  
182 by examining the degree of protein labeling within each tissue over the duration of the study. To this end,  
183 tissue homogenates were reacted with biotin-alkyne via copper-catalyzed click reaction, analyzed by  
184 western blotting using a fluorescent streptavidin conjugate and the change in fluorescence intensity relative  
185 to the non-injected controls was measured as an analog for pAha labeling (Figure 2B,C).



186  
 187 Figure 2. Free Aha concentration and protein incorporation and turnover kinetics in murine tissues were  
 188 determined experimentally to inform the pharmacokinetics model. **(A)** The concentration profile of fAha  
 189 in the plasma and different tissues. The amount of Aha (µg) measured by LC-MS/MS was normalized by  
 190 the total plasma volume or tissue mass and averages were plotted over time. **(B)** Fluorescent western blots  
 191 of the tissue homogenates of control non-injected samples (C) and samples collected 0.5 – 24 h post Aha  
 192 injection (hpi). **(C)** Fluorescence intensity of western blot lanes were normalized to that of the respective  
 193 control samples and averages were plotted as function of time (n=3 biological replicates).

194 The degree of fluorescent signal normalized relative to the background ( $rF$ ) measured in relative  
 195 fluorescence units (RFU) by semi-quantitative western blotting was assumed to be linearly proportional to  
 196 the concentration of pAha using a fluorescent labeling factor,  $k_f$ . For each tissue (denoted ‘x’)

$$rF_x = \frac{\text{signal} - \text{background}}{\text{background}} = k_f [pAha_t]_x \quad \text{Eq. 7}$$

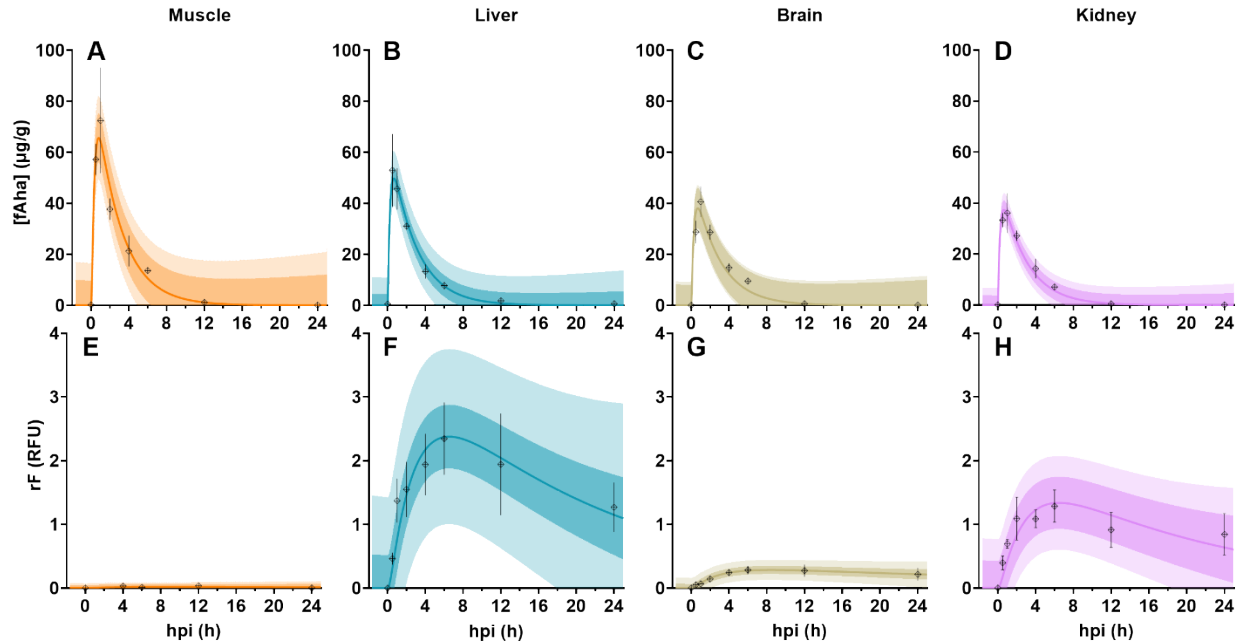
$$\left(\frac{d(rF_x)}{dt}\right) = k_f k_{s,x} [fAha_t]_x - k_{d,x} (rF_x) \quad \text{Eq. 8}$$

## 197 **Aha Labeling Captures Relative Protein Synthesis and Turnover Dynamics in Murine Tissues**

198 The concentration profiles of fAha in the plasma and tissues peaked between 0.5 and 1 hpi and was  
199 mostly cleared from the system by 12 hpi, with the liver having the earliest peak compared to the other  
200 tissues (Figure 3A-D). The early peak can be attributed to the high blood perfusion of the liver (27), which  
201 likely results in faster distribution equilibrium of Aha into the liver compared to other tissues.

202 In all tissues, maximum protein labeling was observed around 6 hpi (Figure 3E-H). However, the  
203 degree of labeling, represented by the maximum fold increase in fluorescence intensity compared to an  
204 internal control, and the kinetics of protein incorporation and turnover varied considerably between tissues.  
205 The liver showed the highest degree of labeling (Figure 3F) as well as the highest relative rates of Aha  
206 incorporation and protein turnover (Table 1), whereas skeletal muscle had the lowest degree of labeling  
207 (Figure 3E) and the slowest relative rates of incorporation and turnover (Table 1). Interestingly, the amount  
208 of fAha ( $\mu\text{g}$ ) per unit mass tissue (g) was higher in skeletal muscle than in liver (Figure 3A,B), indicating  
209 that the low degree of labeling observed in skeletal muscle is predominantly due to a slow rate of muscle  
210 Aha incorporation, implying a lower rate of Met incorporation and protein synthesis.

211 The observed differences in fluorescence intensities are in agreement with previous isotope labeling  
212 studies that showed faster protein turnover rates in liver and kidney compared to brain and skeletal muscle  
213 (28-30). Notably, our model estimated a protein half-life in the brain that is 2.7 times higher than the liver  
214 (Table 1), in close agreement with the findings of Price et al. ( $9 \text{ h}^{-1}$  and  $3 \text{ h}^{-1}$  days for brain and liver,  
215 respectively) (29). The discrepancies between previously reported values and the half-lives values estimated  
216 here can be attributed to the shorter timescale of our experimental setup as compared to stable isotope  
217 labeling technique and the use of semi-quantitative western blotting measurements rather than MS. A more  
218 robust quantitation of pAha concentrations using MS will be required for a more precise determination of  
219 absolute protein kinetics in different murine tissues.



220

221 Figure 3. Aha kinetics and protein labeling following subcutaneous injection of Aha. **(A-D)** The  
222 concentration profiles of free Aha (fAha) in the plasma and different tissues. The amount of Aha ( $\mu\text{g}$ )  
223 measured by LC-MS/MS analysis was normalized by the total tissue mass and plotted over time. **(E-H)**  
224 Relative fluorescence (rF), as measured by western blotting, of proteins isolated from each tissue as a  
225 function of time. Filled points represent mean experimental measurement at each time point, error bars  
226 indicate experimental standard deviation ( $n = 3$  biological replicates). Colored traces indicate best fit of  
227 model to each dataset, with darker and lighter shaded regions showing 95% prediction intervals for residual  
228 error calculated from mean experimental values and all experimental replicates, respectively.

229

230 Table 1. Protein incorporation and degradation estimated from Aha dynamics. Best fit parameter values  
 231 for Aha incorporation, and protein turnover and half-lives in studied tissues.

Parameter, Units	Muscle	Liver	Brain	Kidney
Protein turnover rate, $h^{-1}$	2.23E-2	4.97E-2	2.12E-2	5.06E-2
Protein half-life, h	31.05	13.94	32.6	13.69
Aha Incorporation*, RFU( $\mu g$ pAha $\cdot$ h) $^{-1}$	5.36E-4	2.28E-2	6.06E-3	5.43E-2

232 \*Relative incorporation rate =  $k_f \cdot k_s \cdot mt^{-1}$ , units include RFU per mass pAha.

### 233 Descriptive Statistics Support Model of Biodistribution and Labeling

234 Model validity was examined using the following metrics to investigate parameter stability and  
 235 goodness of fit. First, a prediction interval of residuals was generated for each tissue studied, for both the  
 236 biodistribution and protein labeling models. A 95% prediction interval ( $PI_{\alpha=0.05}$ ) of residuals was calculated  
 237 using all experimental replicates (Figure 3). A second, tighter prediction interval was calculated using the  
 238 mean for each time point (Figure 3). For each tissue, the width of  $PI_{\alpha=0.05}$  from the average line of best fit  
 239 ( $\hat{y}$ ) can be approximated using a naively informed forecast interval that assumes a normal distribution of  
 240 residual error (31).

$$PI_{\alpha=0.05}(t) = \hat{y}(t) \pm 1.96 * \frac{\sum (y_i - \hat{y}_i)^2}{n} * \sqrt{1 + \frac{1}{n} + \frac{(t - \bar{t})^2}{\sum (t_i - \bar{t})^2}} \quad \text{Eq. 7}$$

241 where,  $n$  is the total number of observations,  $(t_i, y_i)$  are the coordinates for each observation,  $t$  is the time  
 242 point of the predicted residual,  $\bar{t}$  is the average time of all experimental observations. These prediction  
 243 intervals demonstrate a narrow range of residual error and capture all experimental means and >95% of  
 244 experimental values, indicating an accurate predictive model.

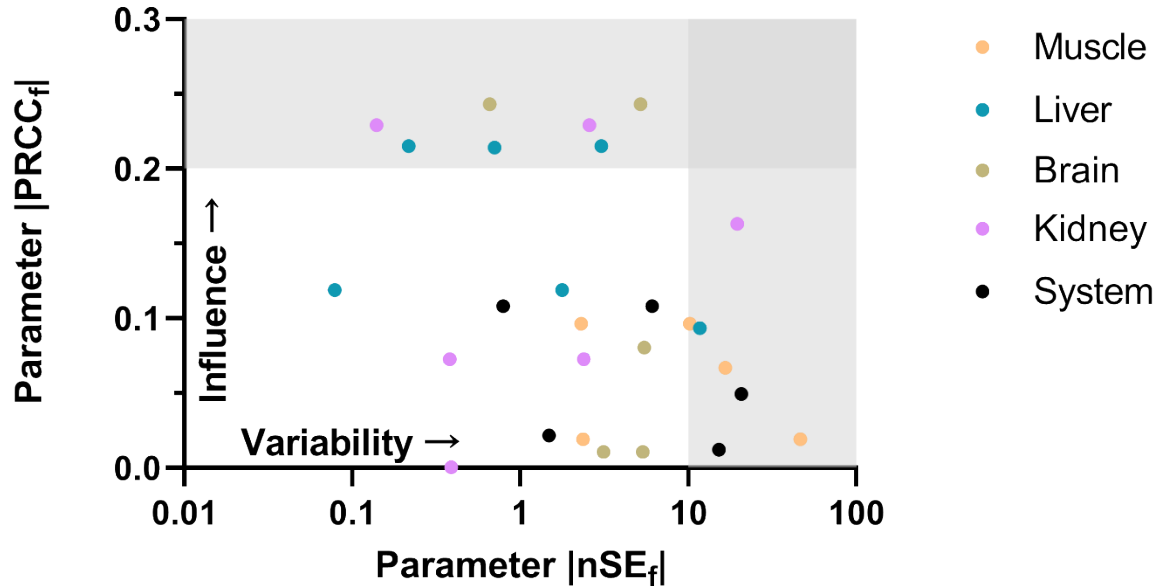
245 Second, the covariance matrix of least squares regression was used to inform a standard error of  
 246 fitting ( $SE_f$ ) for all fitted parameters in the biodistribution model (Supplements S3-S5).  $SE_f$  describes  
 247 variability of each parameter, but also reflects upon the definition of the model. Parameters with best fit  
 248 values near to the constraints are less predictable; wide error would be indicative of a poorly constrained  
 249 system. Error also increases with the number of fitted parameters, is inversely related to the quantity of data

250 points available for fitting, and is weighted by the metric used for optimization. Among all fit parameters,  
251 we found relatively few  $SE_f$  values greater than best fit values by more than an order of magnitude (Figure  
252 3, Supplements S3-5). Notably, we found that the widest error ranges in parameters that were the least well  
253 characterized in the literature, specifically rates describing tissue import and export of fAha. Low  $SE_f$   
254 values, particularly among parameters within reported literature values, support a well characterized model,  
255 although this metric is not fully sufficient to describe a complex non-linear regression.

256 A more thorough analysis was achieved using Monte-Carlo Latin hypercube sampling (LHS) to  
257 perform efficient sampling of the input parameter space and correlation with partial rank correlation  
258 coefficients (PRCCs). This global sensitivity analysis was performed against several metrics to probe the  
259 influence of variation in parameter values on (1) model fitness (2) predicted Aha labeling levels in each  
260 tissue (rF). To address the first of these, PRCC values, which vary between 1 (perfect positive correlation)  
261 and -1 (perfect negative correlation), were calculated comparing variation in the input parameter values  
262 against the sum of square errors for each fitting model. This analysis generates a PRCC value for each  
263 parameter ( $PRCC_f$ ) that characterizes its relative effect on the fitting metric, and therefore the fitting  
264 process.  $PRCC_f$  values higher in absolute magnitude indicate parameters that, when varied independently,  
265 have the greatest influence on the fitting metric with values  $> 0.8$  considered as indications of regions of  
266 instability in the model (32, 33). All parameters fall safely below a  $PRCC_f$  value of 0.3. Parameters with  
267 the highest  $PRCC_f$  values are those that influence the system removal of fAha, likely due to the rapid  
268 metabolic profile exhibited following subcutaneous injection (Figure 3).  $PRCC_f$  values for elimination and  
269 import rates into tissues that work actively to remove fAha were  $> 0.2$ .

270 Taken together,  $PRCC_f$  and  $SE_f$  values demonstrate that influential parameters are not those with  
271 the widest error ranges (Figure 4, Supplements S5-S7). Furthermore, when comparing these values across  
272 the parameter space, there is no one tissue that exhibits over-sensitive behavior by either metric, beyond

273 systemic elimination. These findings provide support for the model definition, boundary constraints, and  
274 biological relevance of best fit parameters.

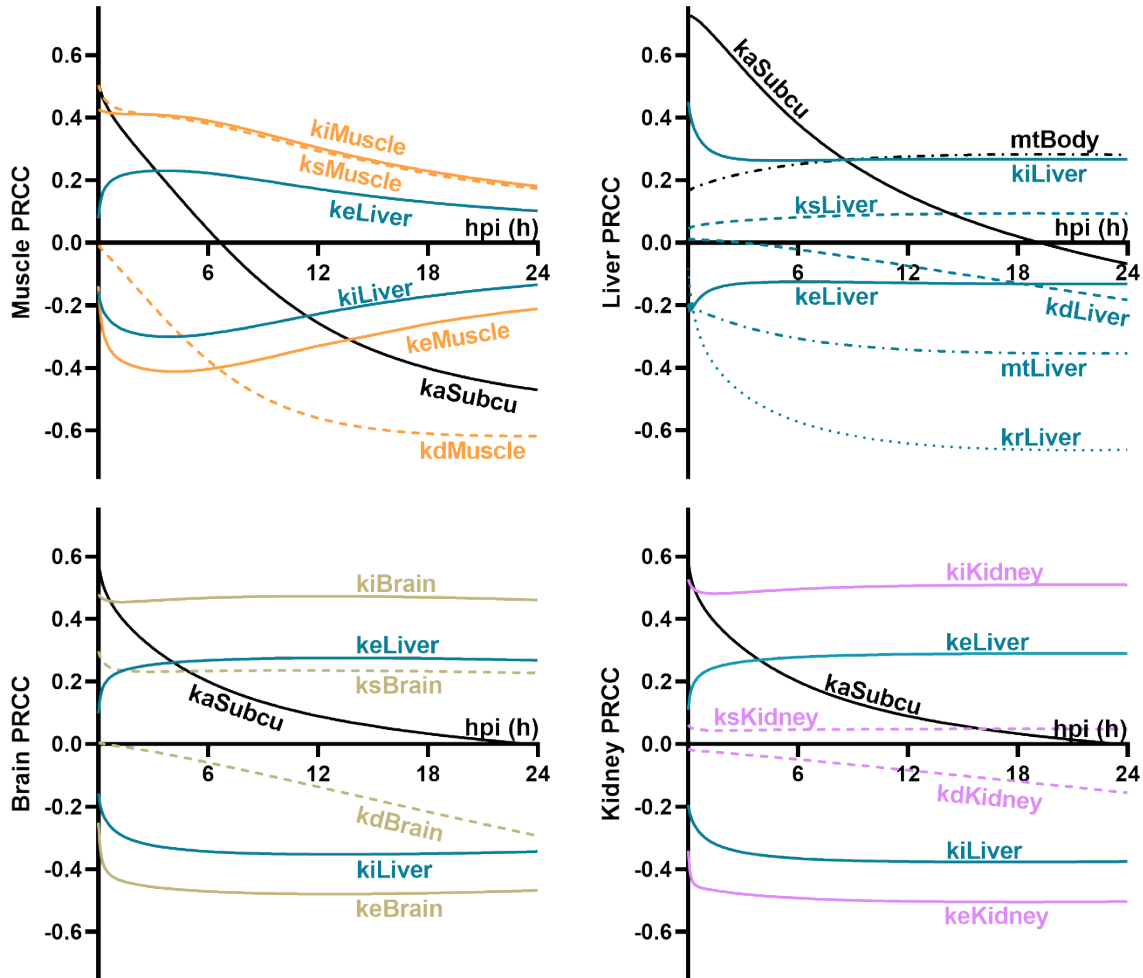


275 Figure 4. Sensitivity analysis for model parameter fitting. Each point represents a distinct parameter from  
276 the model (colored by associated tissues) and coordinates indicate absolute values of normalized standard  
277 error of fitting ( $nSE_f = SE_f / \text{best fit value}$ ) on the x-axis and  $PRCC_f$  on the y-axis. Light gray shaded regions  
278 indicate parameters that have either a relatively high model influence ( $PRCC_f > 0.2$ ) or variability ( $nSE_f >$   
279 10). The dark grey shaded region indicates a domain where parameters would be considered unstable or  
280 poorly constrained with both a high variability and influence on the model.  
281  
282

283 Further application of PRCC analysis allowed examination of the influence of parameter values  
284 upon the predicted degree of Aha labeling in each tissue over time. All model parameters were varied within  
285 their estimated fitting range (Supplements S5-S7) and sampled via LHS (n=10000). An rF value in each  
286 tissue was predicted for each timepoint from 0-24 hpi and the resulting output was correlated to the input  
287 parameter variation using PRCC analysis. Resulting traces elucidate kinetic parameters and physiological  
288 mechanisms that most influence rF during different time domains (Figure 5). For example, immediately  
289 after injection (0-4 hpi), the rate of absorption of Aha from initial injection site (*kaSubcu*) is a critical  
290 mechanism driving rapid labeling efficiency in all four studied tissues. However, the importance of this



291 parameter declines over time, just as the influence of other parameters increases, particularly those  
 292 representing Aha degradation and elimination. The influence of liver transport is prominent in all four  
 293 tissues indicating the liver plays a major role in Aha kinetics. This suggests Aha may be primarily  
 294 metabolized and eliminated by the liver, rather than by eliminated via excretion. This possibility is  
 295 consistent with the known liver functions of toxin removal and amino acid metabolism (34).

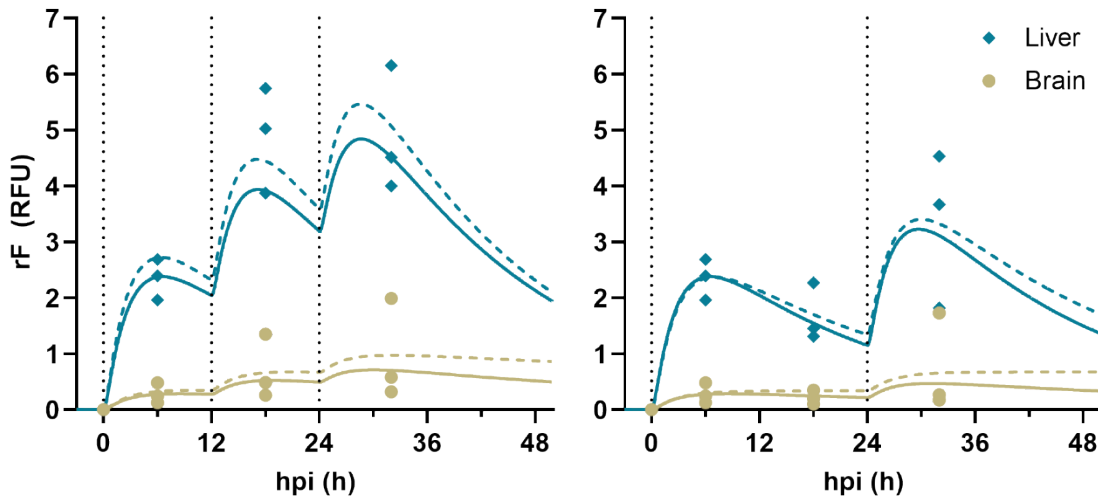


296  
 297 Figure 5. Sensitivity analysis of input parameter variation and Aha labeling in tissues over 24 hpi. Each plot  
 298 shows the time resolved PRCC values for a selection of parameters using predicted rF in each tissue as a  
 299 correlation metric. Parameters shown are either (1) descriptive of dynamics within the relevant tissue or (2)  
 300 related to a different tissue, but with a significant influence on the tissue of interest based upon PRCC  
 301 values  $> |0.2|$ . Trace colors indicate associated tissues (black = systemic parameter, blue = liver, orange  
 302 = muscle, green = brain, purple = kidney), trace patterns indicate parameter type (solid = fAha transport,  
 303 dotted = fAha elimination, dashed = pAha synthesis/degradation, dot-dashed = tissue mass).

304

### 305 **Predictive Simulations Accurately Capture Alternate Dosing Paradigms**

306           Attaining sufficient protein labeling is critical for accurate identification and quantitation of Aha-  
307 labeled proteins using LC-MS/MS. For instance, note the near negligible labeling of skeletal muscle in  
308 Figure 3. If muscle labeling is desired, a much higher Aha dose might be required to attain sufficient  
309 labeling. This underlines the importance of tailoring the dosing regimen of Aha (*i.e.* amount per dose and  
310 dosing frequency) to the tissue of interest and the biological question under investigation. Using the model  
311 described above, fAha biodistribution and tissue protein labeling can be predicted for alternative dosing  
312 regimens to aid future experimental design and predict labeling efficiency depending on the conditions of  
313 a study. However, the model was based on the concentration of Aha in plasma and tissues over 24 h after a  
314 single subcutaneous injection. While this data was sufficiently robust to develop a well-informed model of  
315 Aha patterning after one subcutaneous dose, the use of this model to predict Aha content for longer time  
316 scales or multiple dose paradigms would generate naïve forecasts. To address this gap, we validated the  
317 predictions of our model against a data set that spans a longer time period and multiple injected doses. The  
318 model was used to predict the rF labeling of brain and liver tissues for two alternative dosing paradigms  
319 with either 12 h repeated doses (hrd) or 24 hrd over a 36 h period (Figure S7). As an internal control for  
320 western blotting variation, these new experimental values were normalized by a shared time point with the  
321 previous study (6 hours post initial injection) for each tissue (Figure 6).



322  
323 Figure 6. Model accurately predicts relative labeling in the brain and liver with multiple injection doses.  
324 rF experimental data (dots) and model predictions (lines) for (A) 12 hrd and (B) 24 hrd. For each tissue,  
325 experimental replicates from the repeated dose study are displayed at 6, 18, and 32 hpi as individual points.  
326 The solid line is the predicted trace using the best fit model from the original robust dataset. The dashed  
327 line is the model with parameter values refit to the data from the repeated dose experiments. The vertical  
328 dotted line indicates dose injection timepoints.  
329

330 To determine the ability of the original model to predict Aha incorporation into proteins in various  
331 tissues, the data from each repeated dose study was used to refit the relative pAha synthesis rate and  
332 degradation for each tissue under each repeated dose paradigm. Relative to the parameter fit with the  
333 original experimental data, there was only a slight reduction in the standard error of regression ( $SE_{reg}$ ), a  
334 goodness-of-fit metric, between the original and refit parameters in each tissue (Table 2). Additionally,  
335 among all refit parameters, a single parameter was adjusted beyond a single standard error of fit ( $SE_f$ ) from  
336 the original best fit value (12 hrd liver  $\Delta(k_f \cdot k_s) \approx +1.97SE$ ), and only the degradation rate in the brain  
337 changed by >20% (Table 2).

338 Table 2. Parameter and goodness-of-fit statistics related to the alternative dosing models in Figure 6.

Tissue	Parameter, Units	Pred. Value ( $SE_f$ )	Refit Value	% $\Delta$
Liver, 12 hrd	$k_f \cdot k_s, RFU(\mu g fAha \cdot \mu g pAha \cdot h)^{-1}$	3.16E-4 (2.49E-5)	3.65E-4	+ 15.5%
	$k_d, h^{-1}$	8.29E-4 (1.80E-4)	8.67E-4	+ 4.6%
	$SE_{reg}, RFU$	1.975	1.684	- 14.7%
Brain, 12 hrd	$k_f \cdot k_s, RFU(\mu g fAha \cdot \mu g pAha \cdot h)^{-1}$	4.30E-4 (2.83E-5)	4.84E-5	+12.5%
	$k_d, h^{-1}$	3.54E-4 (1.11E-3)	1.37E-4	- 61.3%
	$SE_{reg}, RFU$	1.147	1.082	- 5.7%

Liver, 24 hrd	$k_f \cdot k_s, RFU(\mu g fAha \cdot \mu g pAha \cdot h)^{-1}$	3.16E-4 (2.49E-5)	3.02E-4	- 4.4 %
	$k_d, h^{-1}$	8.29E-4 (1.80E-4)	6.72E-4	- 18.9%
	$SE_{reg}, RFU$	1.558	1.524	- 2.2%
Brain, 24 hrd	$k_f \cdot k_s, RFU(\mu g fAha \cdot \mu g pAha \cdot h)^{-1}$	4.30E-4 (2.83E-5)	4.28E-5	- 0.5%
	$k_d, h^{-1}$	3.54E-4 (1.11E-3)	1.37E-9	- 99.9%
	$SE_{reg}, RFU$	0.953	0.916	- 3.9%

339

### 340 **Aha Administration Does Not Perturb Normal Physiology in Mice**

341 In addition to the characterization of Aha distribution kinetics in mice, the impact of Aha  
 342 administration on normal physiology must be qualified to establish the applicability of the method for *in*  
 343 *vivo* studies. To this end, the physiological impact of Aha incorporation into newly synthesized proteins  
 344 was evaluated using untargeted plasma metabolomic analysis. Since metabolites are the end products of  
 345 cellular biological processes, we reasoned that a lag time is expected between potential changes in protein  
 346 functions due to Aha incorporation and any associated effects on metabolism. Therefore, given that  
 347 maximum protein labeling occurred  $\sim 6$  hpi (Figure 2B,C and Figure 3E-H), we analyzed the plasma  
 348 metabolome 24 hpi to identify any potential changes in metabolic pathways in response to Aha  
 349 incorporation.

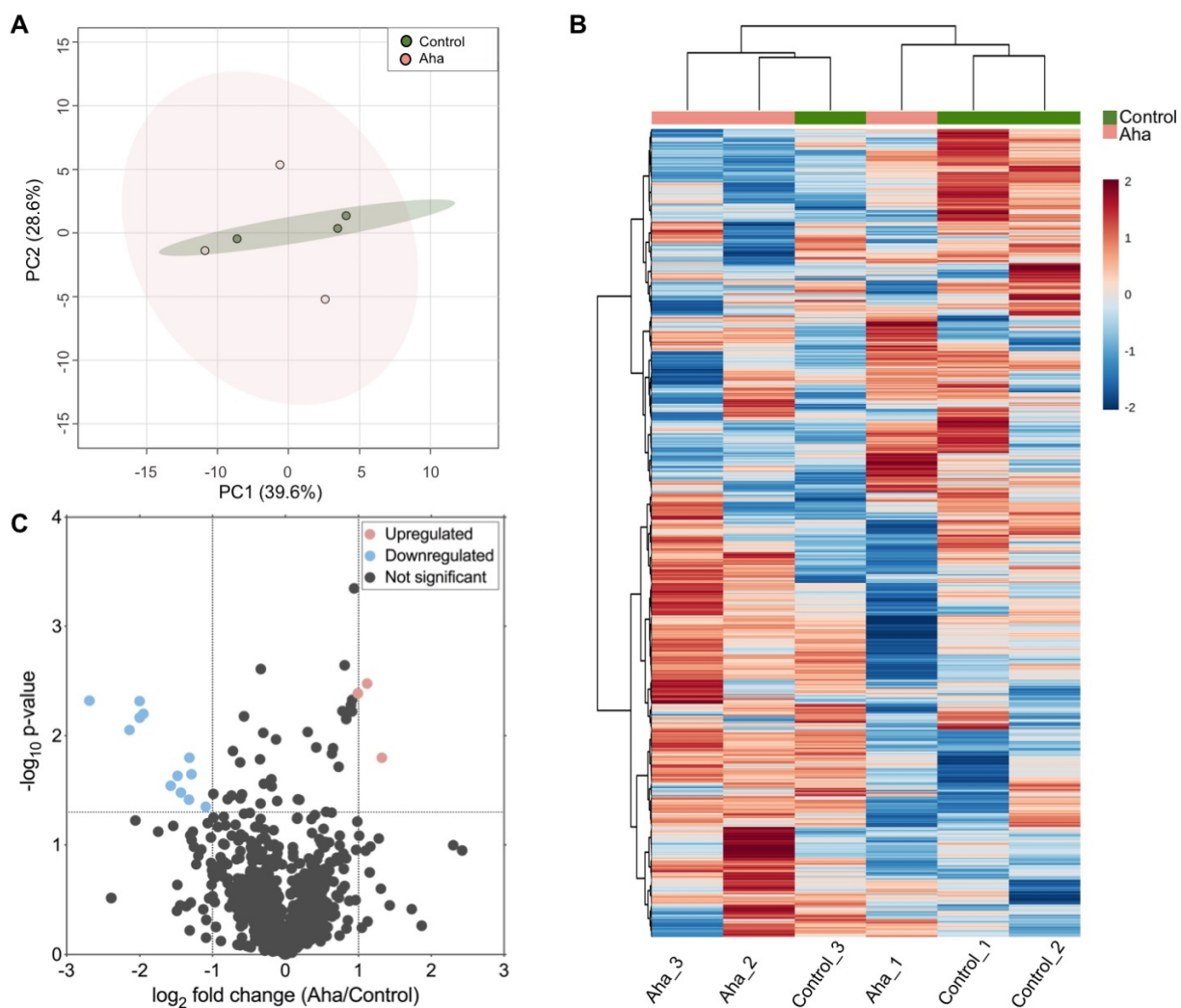
350 LC-MS metabolomic analysis of the plasma identified a total of 1268 mass features (*i.e.*  
 351 metabolites). The peak area of each mass feature is proportional to the amount of the corresponding ion in  
 352 the sample and was used as a measurement for the relative abundance of each identified metabolite across  
 353 samples. Principal component analysis (PCA) revealed no distinct segregation between the control and Aha  
 354 mice, indicating that there were no global differences in the plasma metabolome between the two groups  
 355 (Figure 7A).

356 It should be noted that PCA cannot be performed in the presence of missing values. The occurrence  
 357 of missing values is common in untargeted metabolomic data, resulting from the presence of metabolites  
 358 with concentrations that are lower than the MS detection limit or due to technical reasons such as incomplete

359 ionization or inaccurate peak detection [35]. In our dataset, a total of 194 (2.5%) missing values were  
360 detected across all samples. Since the percentage of missing values was low, it was assumed that the  
361 potential impact of missing values is insignificant [36]. Therefore, the remaining 1112 mass features were  
362 used for PCA (Figure 7A). To confirm the validity of this approach, PCA was also conducted on the dataset  
363 after missing value imputation using the K-nearest neighbor (KNN) method and showed similar indistinct  
364 grouping of the injected and control mice (Figure S8A).

365 In addition to PCA, unsupervised hierarchical clustering analysis (HCA) was conducted and a  
366 heatmap was generated to examine variations in metabolic patterns between the Aha and control groups  
367 (Figure 7B). HCA and heatmap visualization showed no clustering between the biological replicates of  
368 each group and no distinct differential abundance patterns between the two groups. This result further  
369 establishes that there are no substantial metabolic differences between control and injected mice. Similar to  
370 PCA, HCA performed using the dataset imputed via the KNN method resulted in indistinct clustering of  
371 the mice (Figure S8B).

372 Following global analysis using PCA and HCA, Student's *t*-test was employed to identify  
373 metabolites that were differentially regulated between the two groups. In this analysis, a total of 15 out of  
374 1112 metabolites were differentially abundant using a *p*-value of 0.05 and a fold change of  $\geq 2$  as cut-offs  
375 (Figure 7C). Of the 15 metabolites, 3 were upregulated and 12 were downregulated in Aha-treated mice  
376 compared to the control. Searching the 15 metabolites in the METLIN metabolite database using a mass  
377 tolerance of 5 ppm did not identify any known metabolite. The presence of a large number of unknown  
378 mass features is an intrinsic characteristic of untargeted metabolomic studies due to the complexity of the  
379 mammalian metabolome and the lack of structure characterization of a large number of metabolites (35,  
380 36). Yet, the fact that only ~1.3% of metabolites were dysregulated, and that these dysregulated metabolites  
381 did not belong to any of the known major metabolic pathways, signifies that minimal metabolic alterations  
382 occur due to Aha administration.



383

384 Figure 7. Aha administration does not significantly change the murine plasma metabolome. (A) Principal  
385 component analysis (PCA) showed no clear separation between control and Aha-treated groups in the first  
386 two components. Components 1 and 2 account for 39.6% and 28.6% of the total data variability,  
387 respectively. Green and red dots denote control and Aha samples, respectively. Green and red shaded areas  
388 represent the 95% confidence bands of the control and Aha samples, respectively. (B) Heat map of  
389 unsupervised hierarchical clustering analysis (HCA) of the identified metabolites show lack of clustering  
390 between replicates of each group. Color scale indicates metabolite abundance; blue: lowest, red: highest.  
391 (C) Volcano plot comparing the relative abundance of the identified metabolites between control and Aha  
392 groups according to statistical significance and fold change. Horizontal line indicates  $p$ -value = 0.05 and  
393 vertical lines indicate  $\pm 2$ -fold change. Grey, red and blue circles denote equally-abundant, upregulated  
394 and downregulated metabolites, respectively.

395 Finally, to identify the metabolic pathways covered by the LC-MS analysis, analysis of equally-  
396 expressed metabolites was conducted using Metaboanalyst and the Kyoto Encyclopedia of Genes and

397 Genomes (KEGG) metabolic pathway database (37). Several metabolic pathways were detected, including  
398 arachidonic acid metabolism, vitamin B6 metabolism, valine, leucine and isoleucine biosynthesis, galactose  
399 metabolism, and cysteine and Met metabolism (Table S9). This result indicates that the LC-MS analysis  
400 identified metabolites that belong to various metabolic pathways and that these pathways are not  
401 significantly changed in mice injected with Aha.

402 Collectively, the metabolomic analyses demonstrate that Aha administration does not significantly  
403 alter the murine plasma metabolome. This is in agreement with a recent study that investigated the  
404 metabolic effect of growing *E.coli* in media supplemented with ncAAs (38). A major advantage of our  
405 labeling technique is that it does not involve Met restriction or depletion as the case with other labeling  
406 strategies that use a Aha-enriched Met-free diet. Met dietary restriction has been shown to alter the  
407 metabolism in mouse models and in humans (39-41). Being a principle sulfur-containing amino acid, Met  
408 restriction specifically alters Met and sulfur metabolism (40, 41). Notably, the results of the pathway  
409 analysis identified several unchanged metabolites such as L-homocysteine, 5'-Methylthioadenosine, and 3-  
410 sulfinoalanine that belong to cysteine (another sulfur-containing amino acid) and Met metabolism (Table  
411 S9), indicating the advantage of the injection method with regards to its potential impact on metabolic  
412 functions.

## 413 **Methods**

### 414 **Animal Model**

415 Animals used in these studies were derived from female age-matched wild-type C57BL/6 mice  
416 (*Mus musculus*) purchased from The Jackson Laboratory. All experimental protocols were performed in  
417 compliance with established guidelines and all methods were approved by Purdue Animal Care and Use  
418 Committee (PACUC, protocols# 1209000723 and 1801001682). PACUC requires that all animal programs,

419 procedures, and facilities at Purdue University abide by the policies, recommendations, guidelines, and  
420 regulations of the United States Department of Agriculture (USDA) and the United States Public Health  
421 Service (USPHS) in accordance with the Animal Welfare Act and Purdue's Animal Welfare Assurance.

#### 422 **Aha Injection, and Plasma and Tissue Collection**

423 L-azidohomoalanine (Aha; Click Chemistry Tools) was resuspended in  $1 \times$  phosphate buffered  
424 saline (PBS) to  $10 \text{ mg} \cdot \text{mL}^{-1}$ , adjusted to pH 7.4, sterile filtered and stored at  $-20^\circ\text{C}$ . All Aha injections were  
425 administered subcutaneously at  $0.1 \text{ mg} \cdot \text{g}^{-1}$  total mouse weight. Mice ( $n = 3$ , biological replicates) were  
426 euthanized 0.5, 1, 2, 4, 6, 12 and 24 h post injection (hpi). Blood was harvested by cardiac puncture,  
427 collected in EDTA-treated tubes and centrifuged at  $1,500 \times g$  for 10 min at  $4^\circ\text{C}$ . The supernatant (plasma)  
428 was transferred into a new tube, snap frozen in liquid nitrogen and stored at  $-80^\circ\text{C}$ . Liver, brain, kidney and  
429 hindlimb skeletal muscle tissues were dissected at each time point, snap frozen in liquid nitrogen and stored  
430 at  $-80^\circ\text{C}$ . Control plasma and tissues were collected as described above from non-injected mice ( $n = 3$   
431 biological replicates). For the validation of model predictive ability, two Aha dosing regimens were used:  
432 (1) 12 h repeated doses (hrd) and (2) 24 hrd. Liver and brain tissues ( $n = 3$  biological replicates) were  
433 dissected as described above at 6, 18, and 32 hpi, snap frozen in liquid nitrogen and stored at  $-80^\circ\text{C}$ .

#### 434 **Sample Preparation for Aha Analysis**

435 For plasma sample preparation,  $50 \mu\text{L}$  of plasma were mixed with  $10 \mu\text{L}$  of  $1 \times$  PBS, pH 7.4, and  
436  $5 \mu\text{L}$  of  $100 \text{ ng} \cdot \mu\text{L}^{-1}$  L- $\alpha$ -aminobutyric acid ( $\alpha$ -ABA; Sigma Aldrich) that was used as an internal standard.  
437  $12.5 \mu\text{L}$  of trichloroacetic acid (TCA; Sigma Aldrich) were added to the mixture to precipitate proteins.  
438 The mixture was incubated for 10 min at  $4^\circ\text{C}$  and centrifuged at  $16,000 \times g$  for 10 min at RT. The  
439 supernatant was then mixed with 100% acetonitrile (ACN; Fisher Scientific) at a 1:1 ratio (v/v). The mixture  
440 was transferred to an HPLC autosampler vial for LC-MS/MS analysis. For calibration curve generation,



441 Aha standards were prepared by mixing 50  $\mu\text{L}$  of non-injected plasma with 10  $\mu\text{L}$  of a known concentration  
442 of Aha and 5  $\mu\text{L}$  of  $\alpha$ -ABA. Proteins were then precipitated with TCA and prepared for LC-MS/MS analysis  
443 as described above.

444 For tissue sample preparation, tissues were rinsed with ice-cold 1  $\times$  PBS, pH 7.4 to remove residual  
445 blood and homogenized in ice-cold 1  $\times$  PBS, pH 7.4 using a TissueRuptor (Qiagen). The final homogenate  
446 weight was measured and converted to volume by using a homogenate density of 1  $\text{g}\cdot\text{mL}^{-1}$ . Samples were  
447 then prepared for LC-MS/MS analysis as described for plasma by using 50  $\mu\text{L}$  of the tissue homogenate.  
448 The remaining plasma samples and tissue homogenates were snap frozen and stored at  $-80^{\circ}\text{C}$  until use for  
449 western blot and untargeted metabolomic analyses as described below.

#### 450 **LC-MS/MS Targeted Analysis of Aha**

451 An Agilent 1260 Rapid Resolution liquid chromatography (LC) system coupled to an Agilent 6470  
452 series QQQ mass spectrometer was used for Aha analysis (Agilent Technologies). An Intrada Amino Acid  
453 2.0 mm x 150 mm, 3.0  $\mu\text{m}$  column (Imtakt Corporation) was used for LC separation. The buffers were (A)  
454 ACN, 0.3 % formic acid (FA; Sigma Aldrich) and (B) ACN/100 mM ammonium formate (20/80 v/v). The  
455 linear LC gradient was as follows: time 0 min, 20 % B; time 5 min, 20 % B; time 11 min, 35 % B; time 20  
456 min, 100 % B; time 22 min, 100 % B; time 22.5 min, 20 % B; time 30 min, 20% B. The flow rate was 0.3  
457  $\text{mL}\cdot\text{min}^{-1}$ . Multiple reaction monitoring (MRM) was used for MS analysis. Data were acquired in a positive  
458 electrospray ionization (ESI) model based upon parameters in Table 3. The jet stream ESI interface had a  
459 gas temperature of  $325^{\circ}\text{C}$ , gas flow rate of 9  $\text{L}\cdot\text{min}^{-1}$ , nebulizer pressure of 35 psi, sheath gas temperature  
460 of  $250^{\circ}\text{C}$ , sheath gas flow rate of 7  $\text{L}\cdot\text{min}^{-1}$ , capillary voltage of 3500 V in a positive mode, and nozzle  
461 voltage of 1000 V. The delta electron multiplier voltage was 300 V. Agilent MassHunter Quantitative  
462 Analysis software was used for data analysis (v.8.0).

463

464 Table 3. Multiple reaction monitoring (MRM) table for amino acid LC-MS/MS data acquisition

Compound name	Precursor ion ( <i>m/z</i> )	Product ion ( <i>m/z</i> )	Collision energy (eV)
Aha	145.1	101.3	5
Aha	145.1	71.3	10
Aha	145.1	58.3	40
Ala	90	44	15
Arg	175	116	18
Asn	133	87	12
Asp	134	88	14
Cys	122	76	15
Cys-Cys	241.1	152	15
Gln	147	84	22
Glu	148	130	12
Gly	76	30	15
His	156	110	19
Ile	132	86	15
Leu	132	86	15
Lys	147	84	20
Met	150	104	15
Phe	166	120	15
Pro	116	70	15

465

#### 466 **Western Blot Analysis of Aha-Labeled Tissues**

467 Tissue homogenates were thawed and protein concentration was measured using the Pierce 660 nm  
468 Protein Assay (ThermoFisher Scientific). 200 µg of tissue homogenate was alkylated with 40 mM  
469 iodoacetamide for 30 min at RT in the dark with end-over-end rotation. Samples were then reacted for 2 h  
470 at RT with the following click reagents: 50 µM biotin-alkyne (ThermoFisher Scientific), 5 mM tris(3-  
471 hydroxypropyltriazolylmethyl)amine (THPTA; Click Chemistry Tools), 2 mM copper sulfate, 20 mM  
472 aminoguanidine and 10 mM sodium ascorbate. Following the click reaction, proteins were precipitated by  
473 adding ice-cold 100% acetone to the samples at a 4:1 ratio (v/v). Samples were incubated overnight at -  
474 20°C, centrifuged at 21,100 × g for 20 min at 4°C, supernatants were discarded, and protein pellets were  
475 vacuum-dried for 15 min at RT using a CentriVap (Labconco). Dried pellets were resuspended in 8 M urea  
476 in 1× PBS and centrifuged at 16,000 × g for 15 min at RT to remove insoluble particles. The supernatants

477 were transferred into new tubes and protein concentration was measured using the Pierce 660 nm Protein  
478 Assay (ThermoFisher Scientific). Proteins were resolved on 4 – 20% SDS-PAGE gels (BioRad), transferred  
479 to a PVDF membrane (ThermoFisher Scientific) using the Trans-Blot Turbo Transfer System (BioRad) and  
480 probed overnight at 4°C with IRDye 680 Streptavidin (LICOR) diluted 1:3000 in 1:1 TBST:Blocking  
481 Buffer (BioRad). Membranes were imaged using an Azure Biosystems c600. Western blot images were  
482 analyzed using ImageJ (National Institutes of Health) to calculate the mean fluorescence intensities of each  
483 time point. The intensity of the control sample was used to normalize the intensity of each time point (n =  
484 3 biological replicates per blot).

### 485 **Kinetic Modelling of Aha Distribution**

486 Simulations were run on a Lenovo Yoga with an Intel Core i7-8550U CPU @ 1.8 GHz and 8 GB  
487 RAM. Simulations were performed using custom modeling scripts written in Python 3.6 (Supplement S1).  
488 Systems of ordinary differential equations (Supplement S2) were solved using a flexible high order solver  
489 from the SciPy python package (42). Most parameter values and ranges for fitting were informed from  
490 reported literature values or experimental measurements from this study. For parameters related to an  
491 experimental output ([fAha] or rF) without a reported literature value, an initial best estimate was selected  
492 to produce a single time-step change one order of magnitude lower than the maximum recorded  
493 experimental value. These parameters were then allowed to fit within a range of 1.5 orders of magnitude  
494 from the initial estimate. Parameters were fit with a least squares minimization algorithm from 'Lmfit', a  
495 prebuilt python library (43). All best fit values and boundary conditions can be found in the parameter tables  
496 (Supplements S3-5).

### 497 **Parameter Sensitivity Analysis and Model Validation**

498 To effectively sample the input parameter space, Latin hypercube sampling (LHS) was utilized to  
499 generate unique parameter sets (n = 10000), sweeping each parameter value through a range defined by the  
500 boundary constraints from literature (Tables S3-S5) as previously detailed (32, 33). Global sensitivity

501 analysis was performed on the LHS generated parameter sets using partial rank correlation coefficient  
502 (PRCC) analysis. This analysis quantifies the sensitivity of an output variable on the variation in input  
503 parameter values (32, 33). Here, PRCCs were determined for each of the 19 fitted parameters (Table S3)  
504 and 12 static parameters (Table S4) in the biodistribution model, as well as for all 8 parameters in the protein  
505 incorporation model (Table S5). PRCCs were used to characterize the influence of each parameter on the  
506 sum of square errors (SSE), the optimization metric for non-linear regression. Simulations used to inform  
507 PRCCs were performed on the Brown Supercomputing Community Cluster at Purdue University (44), with  
508 each simulation run on a single node with dual 12-core Intel Xeon Gold "Sky Lake" CPUs @ 2.60 GHz  
509 and 96 GB of memory.

510 The standard error of fitting was determined for the 19 fitted parameters (Table S3) in the  
511 biodistribution model and for all 8 fitted parameters (Table S5) in the protein incorporation model. Standard  
512 error values were determined from the covariance matrix during non-linear regression using the built-in  
513 functionalities of the 'Lmfit' python library (43).

#### 514 **Plasma Sample Preparation for Untargeted Metabolomic Analysis**

515 The plasma metabolome of non-injected control samples ( $n = 3$  biological replicates) and samples  
516 collected 24 h post Aha injection ( $n = 3$  biological replicates) was extracted by adding methanol:  
517 chloroform: water (1:1:1 v/v) to 80  $\mu\text{L}$  of each plasma sample. Samples were vortexed briefly and  
518 centrifuged at  $8,000 \times g$  for 5 min at RT. The upper layer was transferred into a new tube and vacuum-dried  
519 overnight at RT. The dried fraction was reconstituted in 75  $\mu\text{L}$  5% ACN and 0.1% FA. Reconstituted  
520 samples were sonicated for 5 min, centrifuged at  $16,000 \times g$  for 8 min at RT, and the supernatants were  
521 transferred to HPLC autosampler vials.

## 522 **Untargeted LC-MS Metabolomic Analysis**

523 Separations were performed on an Agilent 1290 UPLC system (Agilent Technologies). The  
524 metabolites were analyzed using a Waters Acquity HSS T3 column (1.8  $\mu\text{m}$ , 2.1  $\times$  100 mm), with a mobile  
525 phase flow rate of 0.45 mL  $\cdot$  min<sup>-1</sup>, where the mobile phase A and B were 0.1% FA in double distilled water  
526 and ACN at a 1:1 ratio, respectively. Initial conditions were 100:0 A:B, held for 1 minute, followed by a  
527 linear gradient to 20:80 at 16 min, then 5:95 at 22.5 min. Column re-equilibration was performed by  
528 returning to 100:0 A:B at 23.5 min and holding until 28.5 min.

529 The mass analysis was obtained using an Agilent 6545 Quadrupole Time of Flight (Q-TOF) MS with ESI  
530 capillary voltage +3.2 kV, nitrogen gas temperature 325 °C, drying gas flow rate 8.0 L  $\cdot$  min<sup>-1</sup>, nebulizer gas  
531 pressure 30 psig, fragmentor voltage 130 V, skimmer 45 V, and OCT RF 750 V. MS data scans ( $m/z$  70-  
532 1000) were collected using Agilent MassHunter Acquisition software (v.B.06). Mass accuracy was  
533 improved by infusing Agilent Reference Mass Correction Solution (G1969-85001). MS/MS was performed  
534 in a data-dependent acquisition mode on composite samples.

## 535 **Metabolomic Data Statistical Analysis**

536 Peak deconvolution and integration were performed using Agilent ProFinder (v.10.0).  
537 Bioinformatic analyses were performed using Agilent Mass Profiler Professional (v.13.1).  
538 Chromatographic peaks were aligned across all samples. Peak areas were normalized by log<sub>2</sub>-  
539 transformation and applying a 75% percentile shift. Metabolites were filtered out if present in only one  
540 sample. Furthermore, only metabolites present in all 3 replicates of either the control or Aha injected  
541 samples were included. Statistical analysis was performed using unpaired student's *t*-test. Metabolites with  
542  $P < 0.05$  and fold change  $\geq 2$  were considered significant. Peak annotations were performed using the  
543 METLIN metabolite database, with a mass error of less than 5 ppm. Identifications were aided by MS/MS

544 spectra comparisons. Principal component analysis (PCA), hierarchal clustering analysis (HCA) and  
545 metabolic pathway analysis were performed using MetaboAnalyst v.5.0.

## 546 **Conclusions**

547 Here, we report for the first time the biodistribution kinetics of the widely used Met analog, Aha,  
548 in murine tissues, as well as the associated relative rates of incorporation of Aha into protein via protein  
549 synthesis and loss via metabolism and protein turnover. These results showed that liver and kidney have  
550 faster protein synthesis and turnover rates compared to brain and skeletal muscle, which is consistent with  
551 previous studies that utilized isotope labeling (29). We also demonstrated that subcutaneous injection  
552 allows for observing maximum protein labeling in a relatively short time (~ 6 h), which enables studying  
553 proteins with shorter half-lives, in contrast to the traditional method of introducing the ncAA in diet or  
554 using isotope-labeled amino acids. To support these findings, we developed a mathematical framework that  
555 described the distribution kinetics of Aha in murine tissues and its relation to the degree of protein labeling  
556 and computed the relative rates of protein synthesis and turnover. We further validated this framework for  
557 predictive modeling of Aha labeling against an experimental dataset including two different repeated  
558 injection dosing paradigms to demonstrate its efficacy as a tool for future experimental design. Finally, we  
559 investigated the impact of Aha administration on the plasma metabolome and demonstrated that Aha  
560 incorporation into cellular proteins does not have adverse effects on the normal physiology of mice. This  
561 observation further confirms previous results from our group that demonstrated that ncAAs do not affect  
562 the gross behavior nor the physical appearance of treated mice.

## 563 **Data Availability**

564 All relevant data are within the manuscript and its Supporting Information files. Model and code files can  
565 be found at our lab's GitHub repository

566 (<https://github.itap.purdue.edu/TamaraKinzerursemGroup/ncAABiokinetics>)

567

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574 **Conflicts of Interest**

575 The authors declare that they have no conflicts of interest.

576

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700

701 **Supporting Information Captions**

702 **S1 Text.** Code and model files.

703 **S2 Text.** Systems of ODEs for Aha model.

704 **S3 Table.** Distribution model fitting parameters.

705 **S4 Table.** Distribution model static parameters.

706 **S5 Table.** Incorporation model fitting parameters.

707 **S6 Figure.** Representative western blots informing Figures 2 and 3.

708 **S7 Figure.** Representative western blots informing Figure 6.

709 **S8 Figure.** Metabolomic analysis results following missing value imputation.

710 **S9 Table.** Selected metabolic pathways identified by Metaboanalyst analysis of the untargeted LC-MS  
711 analysis of Aha metabolome.

712 **S10 Table.** Untargeted LC-MS Aha metabolomic analysis raw data.