ESM Fig 1. Viral replication kinetics, viability and plasma membrane integrity analysis in E16 infected (MOI of 1 and 0.01) INS(832/13) cells MOI of 1 and 0.01.
Intracellular virus production and extracellular virus release was determined by a dilution assay at different time points (2, 24, 48 and 72h) after infection with E16 at MOI 1 (a) and 0.01 (b), dotted black lines indicate the limit of detection. Cell viability (MTT assay) at indicated time points after E16 infection at MOI 1 (c) and 0.01 (d) compared to NT cells. Plasma membrane integrity determined by LDH leakage at the indicated time points after E16 infection at MOI 1 (e) and 0.01 (f) compared to NT cells. Results include data from three independent experiments, with each measurement performed in triplicate. Data are presented as mean ± SEM * p< 0.05, ** p< 0.01, *** p< 0.001.
ESM Figure 1. Viral replication kinetics, viability and plasma membrane integrity analysis in E16 infected (MOI of 1 and 0.01) INS(832/13) cells MOI of 1 and 0.01.

Intracellular virus production and extracellular virus release was determined by a dilution assay at different time points (2, 24, 48 and 72h) after infection with E16 at MOI 1 (a) and 0.01 (b), dotted black lines indicate the limit of detection. Cell viability (MTT assay) at indicated time points after E16 infection at MOI 1 (c) and 0.01 (d) compared to NT cells. Plasma membrane integrity determined by LDH leakage from cell culture supernatant at the indicated time points after E16 infection at MOI 1 (e) and 0.01 (f) compared to NT cells. Results include data from three independent experiments, with each measurement performed in triplicate. Data are presented as mean ± SEM * \( p < 0.05 \), *** \( p < 0.001 \).
### Checklist for reporting human islet preparations used in research

Adapted from Hart NJ, Powers AC (2018) Progress, challenges, and suggestions for using human islets to understand islet biology and human diabetes. Diabetologia [https://doi.org/10.1007/s00125-018-4772-2](https://doi.org/10.1007/s00125-018-4772-2)

| Islet preparation | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8a |
|-------------------|---|---|---|---|---|---|---|----|
| **MANDATORY INFORMATION** | | | | | | | | |
| Unique identifier | 246 | 247 | 248 | 249 | 250 | 252 | 255 | 256 |
| Donor age (years) | 39 | 67 | 43 | 64 | 59 | 58 | 57 | 61 |
| Donor sex (M/F) | M | M | M | F | F | F | M | M |
| Donor BMI (kg/m²) | 24,7 | 32,5 | 30,9 | 26,9 | 29,4 | Not available | 30,4 | 37 |
| Donor HbA₁c or other measure of blood glucose control | 5.8% 39.9mmol/mol | 5.8% 39.9mmol/mol | 5.8% 39.9mmol/mol | 5.7% 38.8mmol/mol | 6.6% 48.6mmol/mol | 5.9% 41.0mmol/mol | Not available | 6.1% 43.2mmol/mol |
| Origin/source of islets | Scandinavia | Scandinavia | Scandinavia | Scandinavia | Scandinavia | Scandinavia | Scandinavia | Scandinavia |
| Islet isolation centre | Nordic Network for Clinical transplantation, Uppsala | Nordic Network for Clinical transplantation, Uppsala | Nordic Network for Clinical transplantation, Uppsala | Nordic Network for Clinical transplantation, Uppsala | Nordic Network for Clinical transplantation, Uppsala | Nordic Network for Clinical transplantation, Uppsala | Nordic Network for Clinical transplantation, Uppsala | Nordic Network for Clinical transplantation, Uppsala |
| Donor history of diabetes? Please select yes/no from drop down list | No | No | No | No | No | No | No | No |

**If Yes, complete the next two lines if this information is available**

| | | | | | | | | |
| Diabetes duration (years) | | | | | | | | |
| Glucose-lowering therapy at time of death | | | | | | | | |

### RECOMMENDED INFORMATION
## Donor Cause of Death
| Donor cause of death | Not available | Not available | Not available | Not available | Not available | Not available | Not available | Not available |
|----------------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|

## Warm Ischaemia Time (h)
| Warm ischaemia time (h) | Not available | Not available | Not available | Not available | Not available | Not available | Not available | Not available |
|--------------------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|

## Cold Ischaemia Time (h)
| Cold ischaemia time (h) | Not available | Not available | Not available | Not available | Not available | Not available | Not available | Not available |
|--------------------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|

## Estimated Purity (%)
| Estimated purity (%) | 84 | 60 | 94 | 49 | 21 | 45 | 40 | 85 |
|-----------------------|----|----|----|----|----|----|----|----|

## Estimated Viability (%)
| Estimated viability (%) | Not available | Not available | Not available | Not available | Not available | Not available | Not available | Not available |
|--------------------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|

## Total Culture Time (h)
| Total culture time (h) | 4 | 3 | 2 | 5 | 5 | 4 | 4 | 4 |
|------------------------|---|---|---|---|---|---|---|---|

## Glucose-stimulated Insulin Secretion or Other Functional Measurement
| Glucose-stimulated insulin secretion or other functional measurement | 32 | 9.3 | 14.2 | 2.9 | 13.2 | 9.8 | 2.4 | 2.8 |
|---------------------------------------------------------------------|----|----|------|----|------|----|----|----|

## Handpicked to Purity?
| Handpicked to purity? Please select yes/no from drop down list | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
|-----------------------------------------------------------------|-----|-----|-----|-----|-----|-----|-----|-----|

## Additional Notes
| Additional notes | e) Secretory index is calculated as fold increase between low (1mM) and high (20mM) glucose in a dynamic perifusion setup. |
|------------------|------------------------------------------------------------------------------------------------------------------|
|                  |                                                                                                                                 |

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*a* If you have used more than eight islet preparations, please complete additional forms as necessary.

*b* For example, IIDP, ECIT, Alberta IsletCore

*c* Please specify the therapy/therapies

*d* Time of islet culture at the isolation centre, during shipment and at the receiving laboratory

*e* Please specify the test and the results
# Checklist for reporting human islet preparations used in research

Adapted from Hart NJ, Powers AC (2018) Progress, challenges, and suggestions for using human islets to understand islet biology and human diabetes. Diabetologia [https://doi.org/10.1007/s00125-018-4772-2](https://doi.org/10.1007/s00125-018-4772-2)

| Islet preparation | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8a |
|-------------------|---|---|---|---|---|---|---|----|
| **MANDATORY INFORMATION** |
| Unique identifier | 303 | 304 | 306 | |
| Donor age (years) | 39 | 70 | 75 | |
| Donor sex (M/F) | M | F | F | |
| Donor BMI (kg/m²) | 26.6 | 40.8 | 31.1 | |
| Donor HbA₁₀₀ or other measure of blood glucose control | 5.3% 34.4mmol/mol | 6.0% 42.1mmol/mol | 5.4% 35.5mmol/mol | |
| Origin/source of islets | Scandinavia | Scandinavia | Scandinavia | |
| Islet isolation centre | Nordic Network for Clinical transplantation, Uppsala | Nordic Network for Clinical transplantation, Uppsala | Nordic Network for Clinical transplantation, Uppsala | |
| Donor history of diabetes? Please select yes/no from drop down list | No | No | No | |

If Yes, complete the next two lines if this information is available

| Diabetes duration (years) | |
| Glucose-lowering therapy at time of death | |
| Donor cause of death | Not available | Not available | Not available |
|---------------------|--------------|--------------|--------------|
| Warm ischaemia time (h) | Not available | Not available | Not available |
| Cold ischaemia time (h) | Not available | Not available | Not available |
| Estimated purity (%) | 78 | 94 | 95 |
| Estimated viability (%) | Not available | Not available | Not available |
| Total culture time (h)\(^d\) | 3 | 4 | 4 |
| Glucose-stimulated insulin secretion or other functional measurement\(^e\) | 18 | 1.6 | 2.3 |
| Handpicked to purity? Please select yes/no from drop down list | Yes | Yes | Yes |
| Additional notes | e) Secretory index is calculated as fold increase between low (1mM) and high (20mM) glucose in a dynamic perifusion setup. |  |

\(^a\)If you have used more than eight islet preparations, please complete additional forms as necessary  
\(^b\)For example, IIDP, ECIT, Alberta IsletCore  
\(^c\)Please specify the therapy/therapies  
\(^d\)Time of islet culture at the isolation centre, during shipment and at the receiving laboratory  
\(^e\)Please specify the test and the results