

ESM Table 1. Oligonucleotides

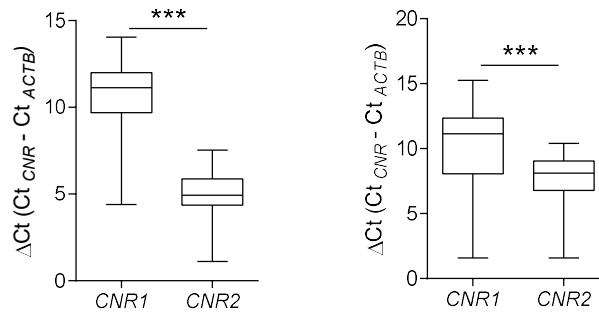
Gene	5'-3' Forward Primer	5'-3' Reverse Primer	
<i>ABDH6</i>	TGTCCGCATCCCTCATAA	GTCGGAACCTTGATCTTGTC	
<i>ABDH12</i>	CTTCCAGCTTGGCAGAAA	CTGTAGCCAAGGTCTGAATG	
<i>ATF4</i>	TATGAGCCCAGAGTCCTATC	CAGGAGGATCGTAAGGTTTG	
<i>ATF6</i>	AACCTGCACCCACTADAGGE	CAAGGACTGGCTGAGCAG	
<i>CCL2</i>	CAGCAAGTGTCCTCAAAGAAG	GTCTTCGGAGTTTGGGTTTG	
<i>CD4</i>	GTACAGCTTCCCAGAAGAAG	CAGCTTGGATGGACCTTTAG	
<i>CXCL10</i>	GCATTCAAGGAGTACCTCTCTC	CAGACATCTCTTCTCACCCCTC	
<i>DAGLA</i>	TAACCTGCGGACCTACAA	GCAGCAGAGGAACACTTT	
<i>DAGLB</i>	GCAGTACTTGATCGTCCTC	CGGTCCAGGGTTACAAATC	
<i>DDIT3</i>	CTTGGCTGACTGAGGAGGAG	CTGGGGAATGACCACTCTGT	
<i>FAAH</i>	CAACTGTGTGACCTCCTATC	ATGAACCGCAGACACAAC	
<i>GAPDH</i>	CATCCTGGGCTACACTGAGC	AAAGTGGTCGTTGAGGGCAA	
<i>GPR78 (BiP)</i>	TTGACCAGCGTGTCATGGAA	CGGAGTTTTGCACAGCTCT	
<i>HLA-ABC</i>	GAGAACGGGAAGGAGACGC	CATCTCAGGGTGAGGGGCT	
<i>ICAM1</i>	GTTGTTGGGCATAGAGACC	GCTCAGTTCATACACCTTCC	
<i>IFNG</i>	GAATGTCCAACGCAAAGC	CCTCGAAACAGCATCTGAC	
<i>IL1B</i>	ATCTCCGACCACCACTAC	AGGTGCTCAGGTCATTCT	
<i>MAGL</i>	AGGTGCCTACCATGTTCT	TGGCTGTCTTTGAGAGA	
<i>NAPEPLD</i>	TGTGGCTGTGAGAATGTG	GTGCTGGGAAGGTGTAAG	
<i>PDL1</i>	CACCAATTCCAAGAGAGAGG	AGAGGTAGTTCTGGGATGAC	
<i>RPLP0</i>	CCTGAGTGATGTGCAGCTGA	CCATTGTGGAACACCTGCTG	
<i>SLC2A1</i>	GTGCAGCAGECTGTGTATGC	GGCCACGATGCTCAGATAGG	
<i>SLC2A2</i>	TGTGCTGGGTTCCCTCCAGT	G999TTGGTTTTGGGTTTCT	
<i>TNF</i>	CTCTTCTCCTTCTGATCGT	CAGAGGGCTGATTAGAGAGA	
<i>CNR1</i>	From [5]		
<i>CNR2</i>			
<i>CNR1b</i>			
<i>ACTB</i>			
Endpoint PCR			
<i>CNB1e4</i>	CCAGCAGACCAGGTGAACAT	GTCGATGGCTGTGAGGAACA	
	5'-3' Forward Primer	5'-3' Reverse Primer	Probe
<i>AAV2-ITR</i>	GGAACCCCTAGTGATGGAGT T	CGGCCTCAGTGAGCGA	FAM- CACTCCCTCTCTGCGCG CTCG-BHQ1
ssDNA for CB1 gRNA cloning			
tatactctgtgaaaggacgaaacaccgctggcgggtggcagacctctggttttagtactctggaacagaatcta			

ESM Table 2. MRM transitions for ECs measurements in ESI+ and ESI-.

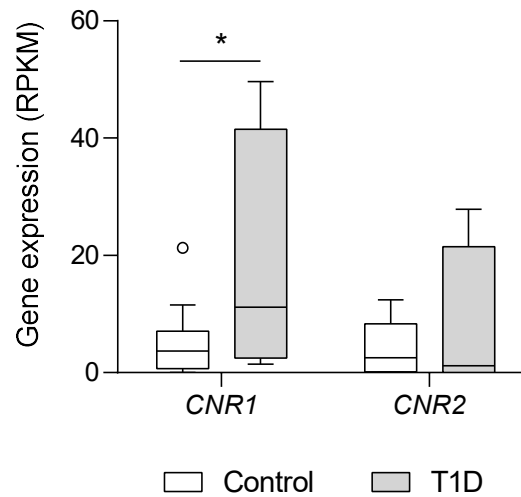
Analyte	Molecular ion [M+H]⁺	Fragment [m/z]	DP [volts]	CE [volts]	CXP [volts]
2-AG	379.2	287.1 (quantifier)	70	19	14
		91 (qualifier)	70	67	10
AEA	348.2	287.1 (quantifier)	26	13	16
		62 (qualifier)	26	13	8
d ₄ -AEA	352.3	287.1 (quantifier)	66	15	20
		66 (qualifier)	66	21	8

^a 2-AG = 2-arachidonoylglycerol; AEA = anandamide; DP = declustering potential; CE = collision energy; CXP = collision cell exit potential

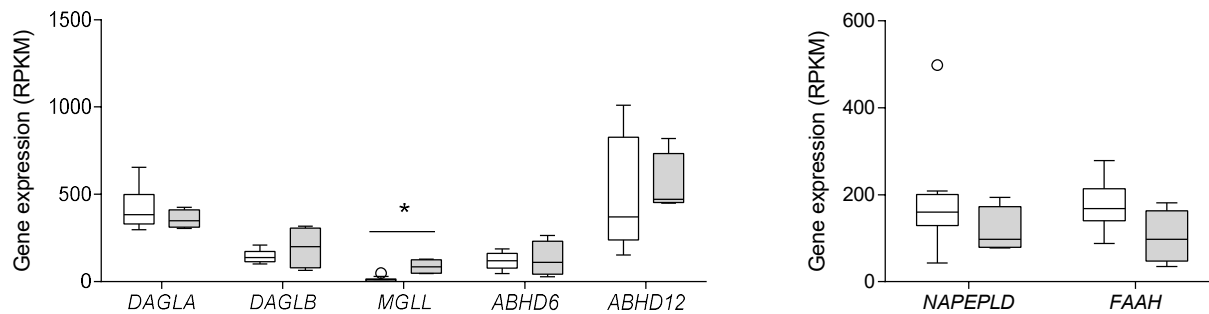
ESM Fig. 1 **a**



b

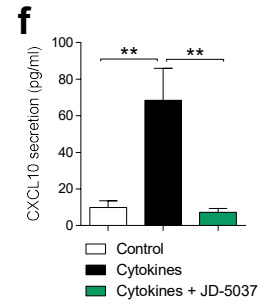
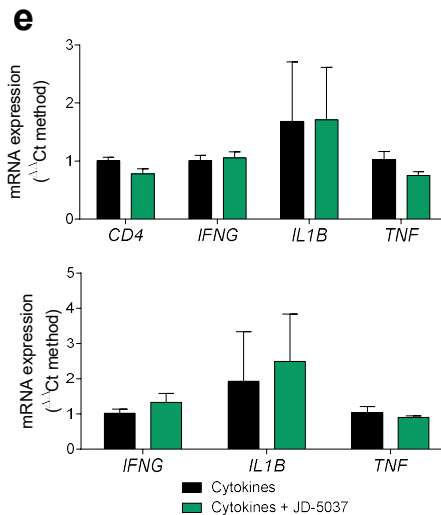
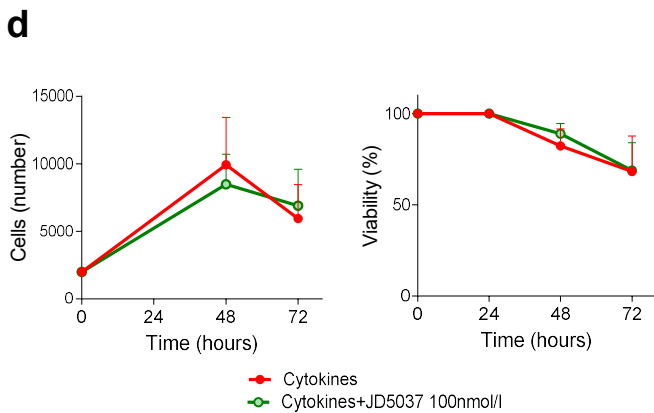
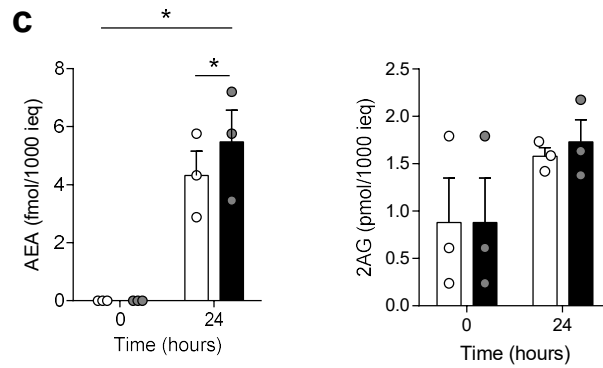
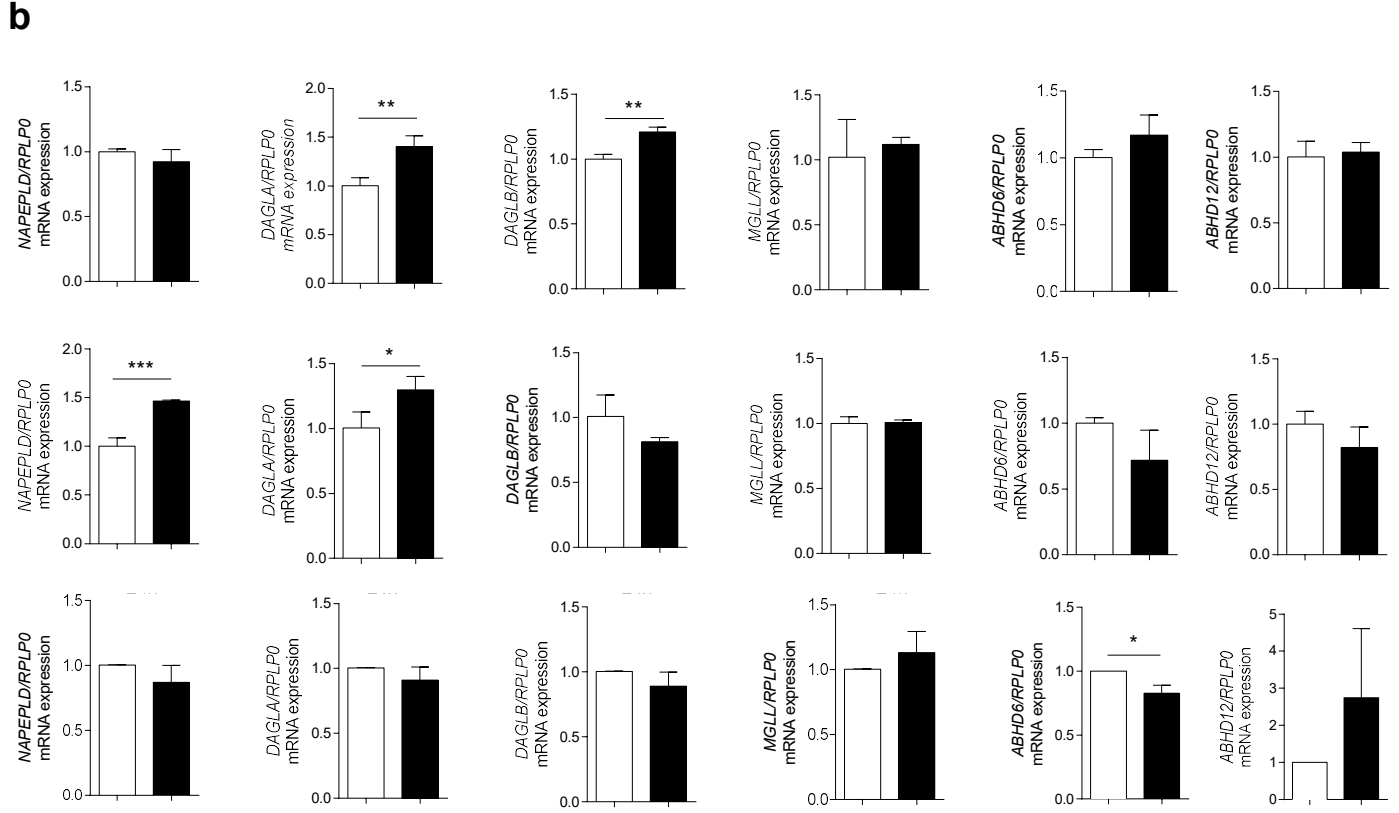
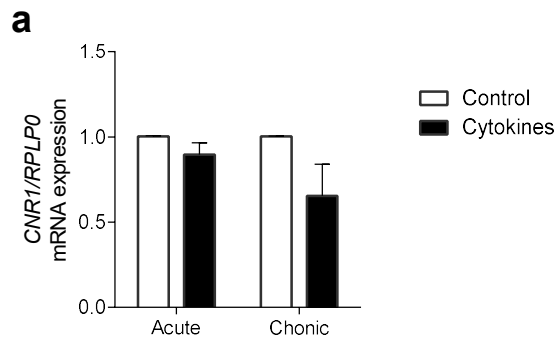


c



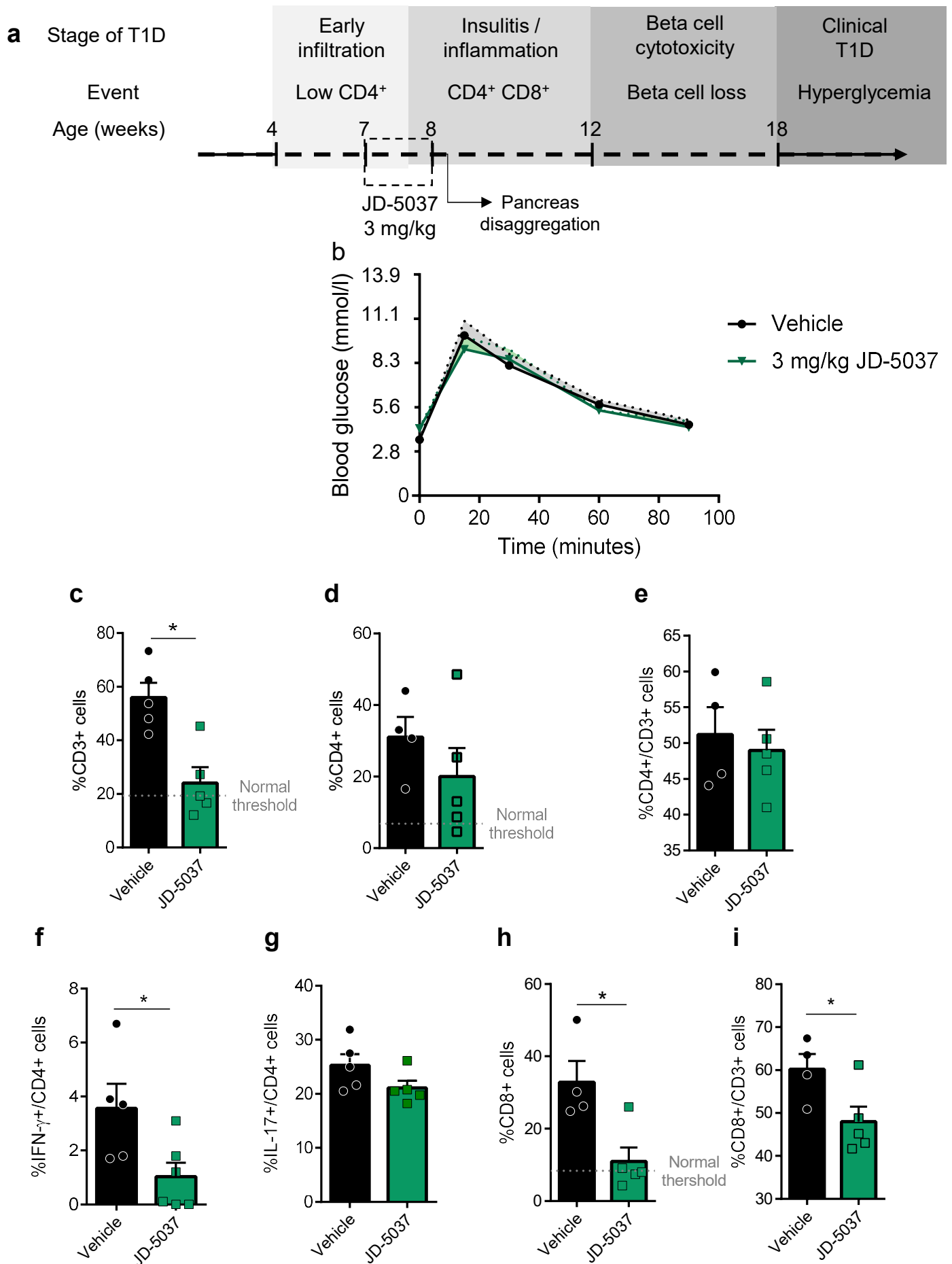
ESM Figure 1. Sorted islet beta cells from T1D donors have higher *CNR1* expression levels compared to those of healthy donors. **(a)** Comparison of *CNR1* and *CNR2* expression levels in PBMCs (left graph) and CD4⁺ T cells (right graph) shown as the Δ Ct of the specific gene and *ACTB* (higher Δ Ct equals to lower expression). Gene expression of **(b)** *CNR1* and *CNR2* mRNA and **(c)** genes involved in 2-AG and AEA metabolism in sorted beta cells from islets of healthy donors (control; $n = 10$) and donors with type 1 diabetes (T1D; $n = 4$). The expression is shown as RPKM in Box & Whiskers Tukey graph. Data from GSE121863. Significance by 2-way ANOVA – Sidak post hoc test; * $p < 0.05$.

ESM Fig. 2



ESM Figure 2. Human islets in culture secrete high levels of endocannabinoids independently of cytokines. Expression of **(a)** *CNR1* mRNA in islets cultured for 2 (acute) or 24 h (chronic) with or without cytokines. The expression of *RPLP0* was used as a control. Data are mean \pm SEM, $n = 4$ donors. Significance by 2-way ANOVA – Sidak post hoc test. **(b)** Expression of endocannabinoid enzymes after 1 (top graphs), 4 (middle graphs) or 24 hours (bottom graphs) of exposure to cytokines. Levels of **(c)** 2-arachidonoyl glycerol (2-AG) and anandamide (AEA) secreted to the media from islets (1000 IEQ) before and after 24 and 48 h of culture with or without cytokines. Data are mean \pm SEM, $n = 3$ donors. Paired Significance by 2-way ANOVA – Sidak post hoc test; * $p < 0.05$, ** $p < 0.01$. PBMCs were treated with cytokines in the presence of vehicle or JD-5037 (100 nmol/l) and **(d)** proliferation (left) and viability (right) of PBMCs, as well as **(e)** mRNA expression levels for proinflammatory cytokines, were determined. The expression of *GAPDH* (top graph) or *CD4* (bottom graph) was used as a control. **(f)** Secretion of CXCL10 by PBMCs into the media. Data are mean \pm SEM, $n = 3$ donors. Significance by 1-way ANOVA – Tukey post hoc.

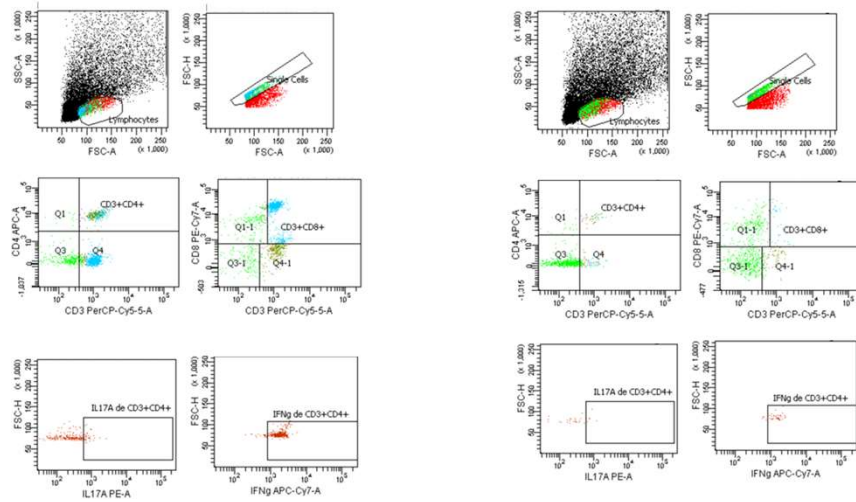
ESM Fig. 3



j

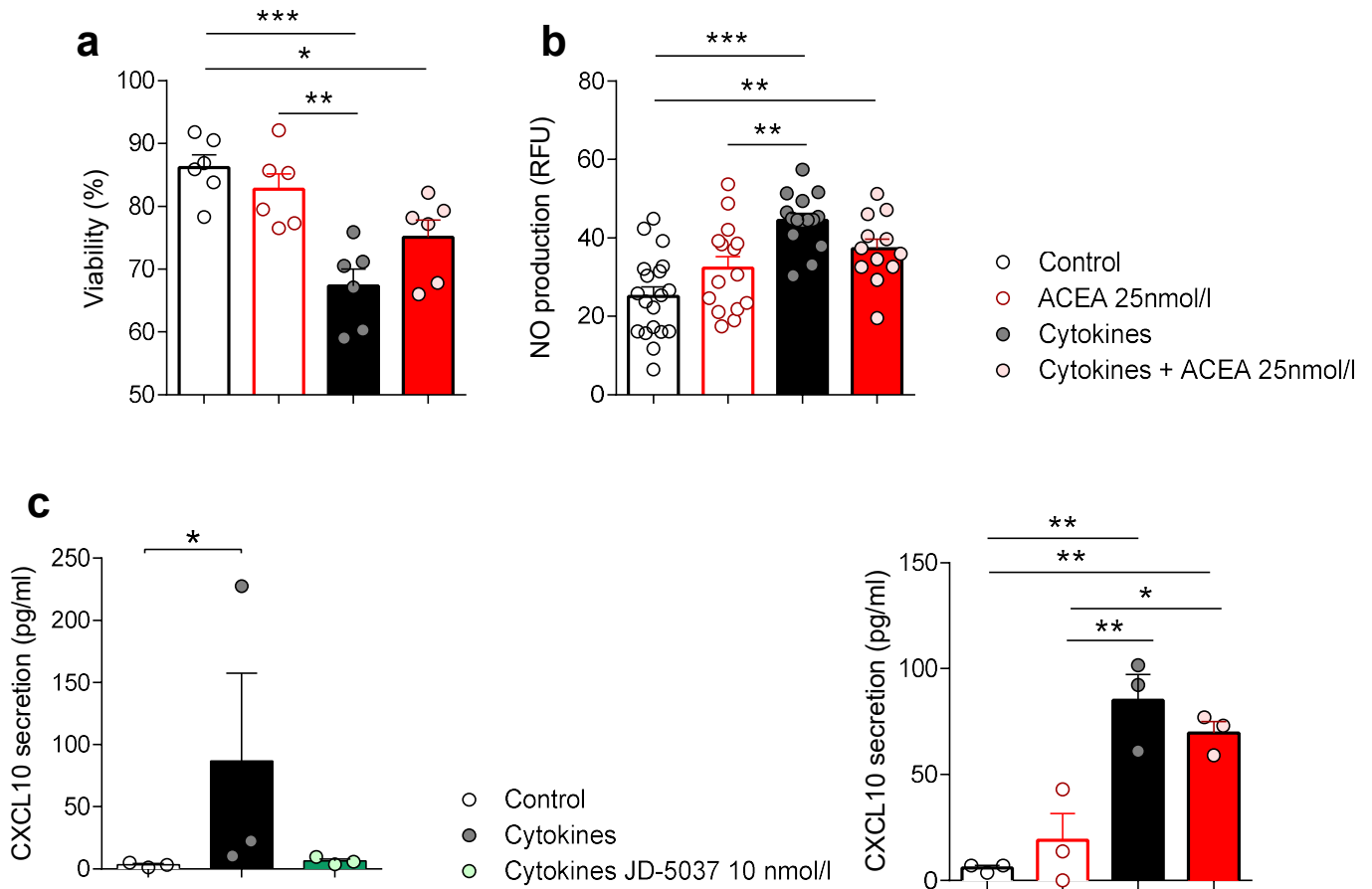
Vehicle-treated NOD

JD5037-treated NOD



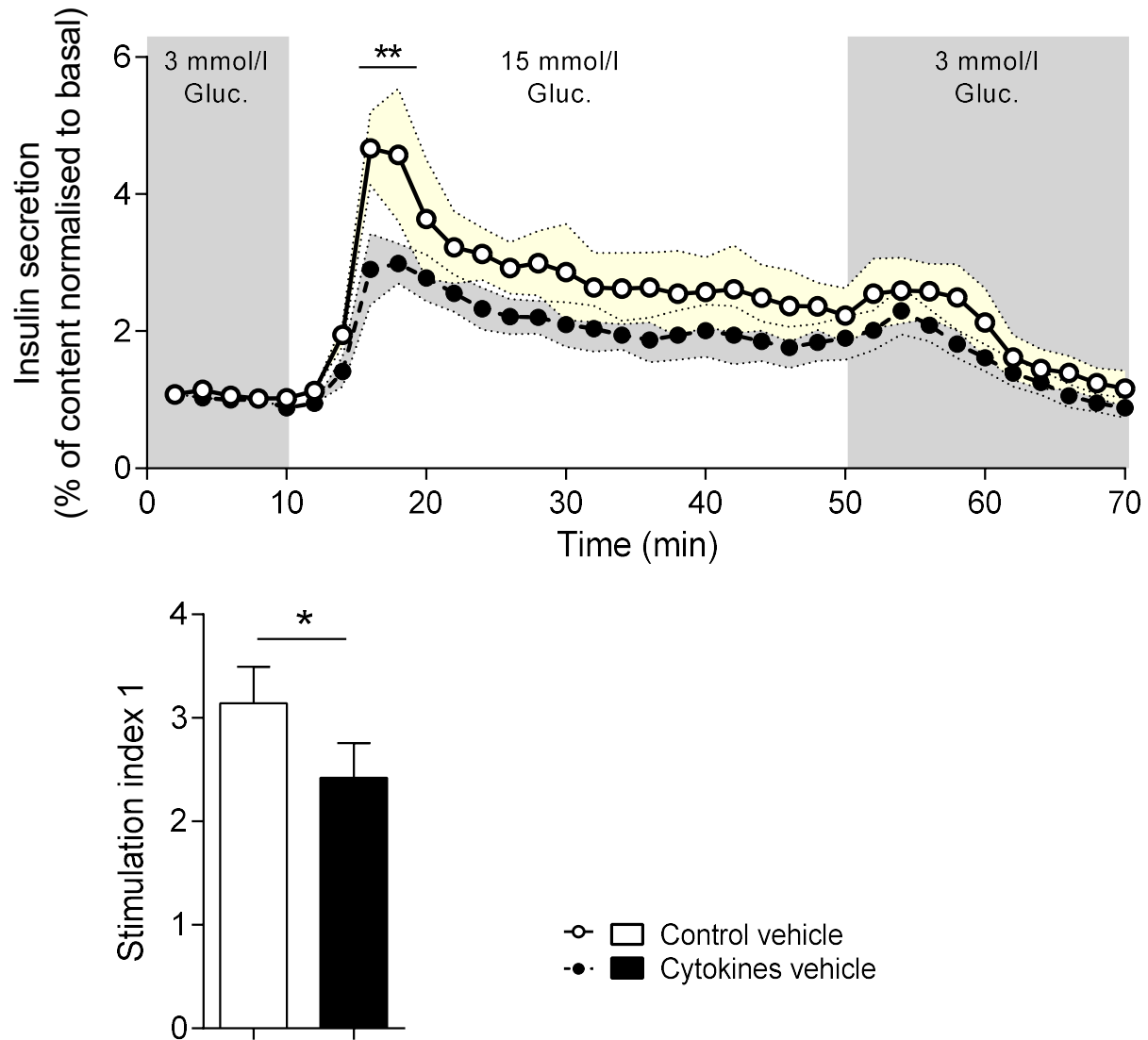
ESM Figure 3. Selective peripheral CB1R blockade arrests initiation of insulinitis in NOD mice. **(a)** Schema of the experimental procedure. **(b)** Intraperitoneal glucose tolerance test after 1-week treatment with vehicle or JD-5037. Quantification by flow cytometry of various immune cell subpopulations **(c-j)** in infiltrated lymphocytes in the pancreas of NOD mice treated with vehicle or JD-5037. Data are mean \pm SEM and individual values. The dotted line represents the values obtained in 4-week-old NOD mice. Significance by Student's t-test; * $p < 0.05$, $n = 5-6$ mice/group.

ESM Fig. 4



ESM Figure 4. ACEA and cytokines do not have a synergistic effect on islets. **(a)** Islet viability and **(b)** NO production in islets treated with vehicle of ACEA (25 nmol/l) and with a mix of cytokines. **(c)** Islet CXCL10 secretion into the media. Significance by 1-way ANOVA – Tukey post hoc test; * $p < 0.05$, ** $p < 0.01$, *** $p < 0.001$, $n = 2-3$ donors.

ESM Fig. 5



ESM Figure 5. Cytokines induce beta cell dysfunction. Dynamic GSIS after 24 h of insult with a mix of cytokines, and stimulation index, $n = 6$ donors. Data are mean \pm SEM (shaded or error bars). * $p < 0.05$, ** $p < 0.01$ between cytokine and control groups.

Cold ischaemia time (h)								
Estimated purity (%)	70	75	80	80	90	80	80	80
Estimated viability (%)	95	91.4	92.9	92.3	94	93.9	91.3	88.5
Total culture time (h) ^d	24H-Multiple timepoints	36H-Multiple timepoints	36H-Multiple timepoints	24H-Multiple timepoints	18H-Multiple timepoints	24H-Multiple timepoints	24H-Multiple timepoints	24H-Multiple timepoints
Glucose-stimulated insulin secretion or other functional measurement ^e	S1/B 3.61	S1/B 2.29	S1/B 2.43	S1/B 2.25	S1/B 1.83	S1/B 3.93	S1/B 2.01	S1/B 5.14
Handpicked to purity? Please select yes/no from drop down list	No	No	No	No	No	No	No	No
Additional notes	CRISPR/Cas9	CRISPR/Cas9	Response to cytokines	Response to cytokines	Response to cytokines	Response to cytokines	CRISPR/Cas9	CRISPR/Cas9

^aIf you have used more than eight islet preparations, please complete additional forms as necessary

^bFor example, IIDP, ECIT, Alberta IsletCore

^cPlease specify the therapy/therapies

^dTime of islet culture at the isolation centre, during shipment and at the receiving laboratory

^ePlease specify the test and the results

Islet preparation	1	2	3	4	5	6	7	8 ^a
MANDATORY INFORMATION								
Unique identifier	EW1	IG24	IG25	IG26	IG27	IG28	IG30	
Donor age (years)	28	49	26	70	29	56	50	
Donor sex (M/F)	M	M	F	M	M	M	F	
Donor BMI (kg/m ²)	28.1	20.9	36.7	26.6	43.3	24	30	
Donor HbA _{1c} (%)	5.7	5.5	5.6	5.6	5.8	5.0	5.4	
Donor HbA _{1c} (mmol/mol)	39	37	38	38	40	31	36	
Origin/source of islets ^b	Inserm UMR1190	Inserm UMR1190	Inserm UMR1190	Inserm UMR1190	Inserm UMR1190	Inserm UMR1190	Inserm UMR1190	
Islet isolation centre	CHU, Univ. Lille	CHU, Univ. Lille	CHU, Univ. Lille	CHU, Univ. Lille	CHU, Univ. Lille	CHU, Univ. Lille	CHU, Univ. Lille	
Donor history of diabetes? Please select yes/no from drop down list	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 ^c								
RECOMMENDED INFORMATION								
Donor cause of death								
Warm ischaemia time (h)								
Cold ischaemia time (h)								

Estimated purity (%)	90	90	70	70	50	40	70	
Estimated viability (%)	93.1	96.7	72	96	91.8	91.9	93	
Total culture time (h) ^d	24H-Multiple timepoints	72H-Multiple timepoints	36H-Multiple timepoints	20H-Multiple timepoints	24H-Multiple timepoints	24H-Multiple timepoints	24H-Multiple timepoints	
Glucose-stimulated insulin secretion or other functional measurement ^e	S1/B 1.05	S1/B 5.88	S1/B 5.20	S1/B 3.15	S1/B 2.74	S1/B 0.96	S1/B 3.43	
Handpicked to purity? Please select yes/no from drop down list	No	No	No	No	Yes	Yes	No	
Additional notes	Response to cytokines	CRISPR/Cas9	CRISPR/Cas9	CRISPR/Cas9	CRISPR/Cas9	CRISPR/Cas9	CRISPR/Cas9	

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^ePlease specify the test and the results

Diabetologia

Islet preparation	1	2	3	4	5	6	7	8 ^a
MANDATORY INFORMATION								
Unique identifier	IG3	IG4	IG6	IG8	IG9	IG10	IG11	IG12
Donor age (years)	55	33	56	46	44	50	61	73
Donor sex (M/F)	F	M	M	M	M	M	F	M
Donor BMI (kg/m ²)	27.5	24.5	25.2	21.1	27.8	24.7	23.3	26
Donor HbA _{1c} (%)	5.5	5.1	5.3		5.5	5.4	5.6	5.7
Donor HbA _{1c} (mmol/mol)	37	32	34		37	36	38	39
Origin/source of islets ^b	Inserm UMR1190	Inserm UMR1190	Inserm UMR1190	Inserm UMR1190	Univ. Maastricht	Inserm UMR1190	Inserm UMR1190	Inserm UMR1190
Islet isolation centre	CHU, Univ. Lille	CHU, Univ. Lille	CHU, Univ. Lille	CHU, Univ. Lille		CHU, Univ. Lille	CHU, Univ. Lille	CHU, Univ. Lille
Donor history of diabetes? Please select yes/no from drop down list	No	No	No	Yes	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 ^c								
RECOMMENDED INFORMATION								
Donor cause of death								
Warm ischaemia time (h)								
Cold ischaemia time (h)								
Estimated purity (%)	80	90	80	90	90	80	80	90

Estimated viability (%)	96	97	98.7	97	97.7	95	98	97
Total culture time (h) ^d	24H-Multiple timepoints	96H-Multiple timepoints	24H-Multiple timepoints	24H-Multiple timepoints	48H-Multiple timepoints	36H-Multiple timepoints	48H-Multiple timepoints	24H-Multiple timepoints
Glucose-stimulated insulin secretion or other functional measurement ^e	S1/B 3.69	S1/B 1.62	S1/B 6.76	S1/B 4.7	S1/B 1.97	S1/B 13.67	S1/B 3.68	S1/B 1.24
Handpicked to purity? Please select yes/no from drop down list	No	No	No	No	No	No	No	No
Additional notes	Response to cytokines	Response to cytokines	Response to cytokines	Response to cytokines	Response to cytokines	Response to cytokines	Response to cytokines	Response to cytokines

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^bFor example, IIDP, ECIT, Alberta IsletCore

^cPlease specify the therapy/therapies

^dTime of islet culture at the isolation centre, during shipment and at the receiving laboratory

^ePlease specify the test and the results

Islet preparation	1	2	3	4	5	6	7	8 ^a
MANDATORY INFORMATION								
Unique identifier	IG33	IG34						
Donor age (years)	58	65						
Donor sex (M/F)	F	F						
Donor BMI (kg/m ²)	24	51						
Donor HbA _{1c} (%)	6.1	5						
Donor HbA _{1c} (mmol/mol)	43	31						
Origin/source of islets ^b	Inserm UMR1190	Inserm UMR1190						
Islet isolation centre	CHU, Univ. Lille	CHU, Univ. Lille						
Donor history of diabetes? Please select yes/no from drop down list	No	No						
If Yes, complete the next two lines if this information is available								
Diabetes duration (years)								
Glucose-lowering therapy at time of death ^c								
RECOMMENDED INFORMATION								
Donor cause of death								
Warm ischaemia time (h)								
Cold ischaemia time (h)								
Estimated purity (%)	70							

Estimated viability (%)	92							
Total culture time (h) ^d	24H-24H	24H-24H						
Glucose-stimulated insulin secretion or other functional measurement ^e								
Handpicked to purity? Please select yes/no from drop down list	No	No						
Additional notes	Response to ACEA	Response to ACEA						

^aIf you have used more than eight islet preparations, please complete additional forms as necessary

^bFor example, IIDP, ECIT, Alberta IsletCore

^cPlease specify the therapy/therapies

^dTime of islet culture at the isolation centre, during shipment and at the receiving laboratory

^ePlease specify the test and the results