Supplementary Materials

Supplementary table 1. RT-qPCR primers and probes.

Candidate gene	Forward primer	Reverse primer	Probe	Amplicon length	Reference sequence
Sox9	TTCCGCGACGTGG	TCGAATTCGTTGACGT	AGCAGCGACGTCATCT	77bp	NM_00100
50x9	ACAT	CGAA	CCAACATAGAGAC	77bp	2978.1
LouE	GGCTCCACAGCCT	TTGTTGCTGTGAAATC	AATCTTGATGAATTCC	100lasa	XM_846738
Lgr5	AGAGACTTTAG	CTAGTTCTTT	CCACCGCCA	109bp	.2
Loud	CTGGGCAGACTGC	GCAGAGGGTTCCCCAT	AACAACATCAAGGCC	82bp	XM_003562
Lgr6	AGGAACT	GAAA	ATCCCAGAGAAGG	62bp	2187.1

Supplementary table 2. Summary of the results obtained by IHC, RT-qPCR and histological analysis of the samples. .

	IHC	HC RT-qPCR		R	Histological analysis (H&E staining)						
		•					Ulceration/	(11&E Stair)	iiig)		
	Sox9	Sox9	Lgr5	Lgr6	Differentiation	Invasion	haemorragies	Mitosis	Apoptosis	Necrosis	Inflammation
SCC											
1	0	0.03	0.02	0.09	WD	Yes (focal)	no	21/17	+++	yes	2-3; L, PC
2	0	0.03	0.07	0.09	WD, in situ	No	yes	3/10	+	No	2; N, due to ulceration
3	0	0.05	0.01	2.52	MD/PD	yes	yes	13/10	+	yes	2; N
4	0	0.06	0.02	0.36	PD	yes	Yes	16/10	+++	yes	2; N
5	0	0.14	0	0.69	WD	yes	yes	16/10	+	yes	2; L, PC
6	25>-50	0.15	0.01	0.65	PD	yes	yes	28/10	+++	yes	3; N, L, PC
7	10>-25	10.25	0.27	0.11	PD/spindle cell	yes	yes	32/10	+	yes	4; N, L, PC
8	10>-25	74.25	0	0	PD	yes	yes	18/10	+++	yes	3; N, L, PC
9	10>-25	0.28	0.18	0.74	WD	Yes	Yes	12/10	++	No	1; L, PC, N
BCC											
1	10>-25	0.23	0	0.34	Basosquamous	Yes	Yes	28/8	-/+	Yes	1; L, PC, N
2	0	0.13	0.06	5.18	Scattered foci of squamous differentiation	Yes	No	26/10	++	Yes	1; L, PC
3	0	0.03	0	0.04	Basal	Yes	Yes	19/10	++	Yes	1; L, PC, N
4	0	0.14	0.01	0.53	Scattered foci of squamous differentiation	No	No	3/10	+	No	1; L, PC
5	25>-50	0.29	0.01	9.60	Basal	Yes	Yes	64/10	-	Yes	1; N
6	>50	0.32	0.06	2.03	Basal, some parts with vacuolated cytoplasm	Yes	Yes	26/10		Yes (+++center)	2; L, PC, N
TL					<i>J</i> 1					,	
1	0	0.68	5.14	2.91	Bulb type	No	No	4/10	-/+	No	0; scattered L
2	10>-25	1.65	1.98	25.55	Bulb type	No	No	10/10	-/+	No	0
3	0>-10	0.53	0	0.01	Bulb type	Yes	No	3/10	-/+	No	0; scattered L
IKA					, ,						
1	0	3	0	0.49	WD, MALIGNANT	Yes	Yes	5/10	+	Yes	4; N, L, PC
2	0	0.40	0.06	0.38	WD, MALIGNANT	Yes	Yes	8/10	++	Yes	4; N, L, PC
											2; L, PC
3	10>-25	0.55	0.11	0.48	WD	No	No	5/10	-/+	No	(surrounding
											the neoplasm)
4	10>-25	1.03	0.58	0.22	WD	No	No	5/10	-/+	No	No
5	25>-50	1.20	0.79	0.24	WD	No	No	5/10	-/+	No	No
6	>50	1.09	4.98	3.84	WD	No	No	5/10	-/+	No	No
7	0>-10	1.37	7.22	4.42	WD	No	No	5/10	-/+	No	No
8	0>-10	2.32	2.04	0.63	WD	No	No	5/10	-/+	No	2; L, PC (within the neoplasm)
-	40	0.1-	0.5	o ===	****	•		= // 0			1; L, PC (within
9	10>-25	0.65	0.36	0.77	WD	No	No	5/10	-/+	No	the neoplasm)
TB											
1	10>-25	0.89	8.99	20.52	Ribbon type	No	Yes	112/10	-/+	No	2; N
2	25>-50	0.81	1.72	6.6	Ribbon type	No	No	33/11	+	No	No
3	25>50	3.60	1.37	66.04	Ribbon type	No	No	20/10	-/+	No	No

4	0	1.79	0.29	25.96	With ORS diff Trabecular/papillar/spindle,	No	Yes	16/10	++	No	No
5	0	19.24	0.86	46.94	with cavernous cyst	No	No	21/11	-	No	No
6	10>-25	0.24	8.04	3.13	With ORS diff, spindle	No	No	21/10	++	No	No
7	0	1.16	9.74	11.79	Trabecular type Trabecular type. and	No	No	23/8	+	No	No
8	0>-10	1.40	5.83	13.28	papillary bodies?	No	No	62/10	-	No	No
TE											2.1
											2; L, mainly perivascular in
1	0>-10	1.18	0.04	0.39	Infundibular cyst, matrical	No	No	48/10	-/+	No	the
					cords and nests			(matrical)			surrounding
2	0>-10	0.19	0.05	0.4	Mainly matrical	No	No	65/10	_	No	dermis No
3	0	0.60	0.03	0.14	Mainly Infundibular	No	No	1/10	-/+	No	No
					,			, -	,		1; L,
4	0	0.23	1.04	0.99	Mainly matrical	No	No	26/10	-/+	No	surrounding
					,						cystic structures
_	0	0.22	0.00	0.71	Mainly Infundibular/Basal	NI		115/10		NI	
5	0	0.22	0.88	0.61	cell	No	yes	115/10	-	No	1; L, PC
6		0.21	0.88	2.94	MALIGNANT TE Mainly matrical with intermediate	Yes	TYOS	50/10	_	No	2; L, PC
6	10>-25	0.21	0.00	2.94	diff	ies	yes	30/10	+	NO	2; L, FC
					MALIGNANT TE Mainly		No:				3; L, PC,
7	25>-50	8.49	0.45	6.15	matrical with intermediate	Yes	ulceration;	40/10	+	Yes	associated with
					diff		Yes: haemorrages	•			invasive nests
0	0	= 0.4		0.04	MALIGNANT TE	27	_	= 0.40			0 I DC
8	0	5.86	0.07	3.31	Basosquamous	Yes	Yes	79/8	++	Yes	3; L, PC
0	0	0.27	2.46	2.24	MALIGNANT TE	V	V	01/10		V	3; L, PC, with
9	0	0.27	2.46	2.24	Mainlymatrical with intermediate diff	Yes	Yes	81/10	++	Yes	associated pyogranuloma
					MALIGNANT TE Mainly						
10	0	0.27	0.25	0.07	matrical with foci of IRS	No	No	80/10	-	No	2; L (aggregates)
					diff. MALIGNANT TE Mainly						3; L, PC, with
11	0	0.12	0.66	0.3	matrical with intermediate	Yes focal	Yes	39/10	-/+	Yes	associated
					diff						pyogranulomas
PM					Multiple foci of squamous						2.
1	10>-25	0.14	0.20	1.69	diff	Yes	No	77/10	+	Yes	2; Granulomatous
					IRS* diff in one area of the	No fibrous					1; L, PC,
2	0>-10	0.49	3.23	1.98	wall	tissue	No	50/10	-/+	No	mainly
					(but trichoyaline granules not visible)	surrounding		,	,		perivascular
					Multifocal IRS* diff within						
3	0>-10	0.20	1.62	4.25	the wall. Rare squamous	No, dome shaped	No	51/10	-/+	No	2; L, PC
					diff	snaped					• I DC I
4	0>-10	0.18	0	0.20	Multifocal IRS* diff within	No	No	89/10	+++	Yes central	2; L, PC mainly surrounding
•	0- 10	0.10	Ü	0.20	the wall.	140	140	07/10		res certaur	the neoplasm
					Multifocal IRS* diff within						2; L, PC mainly
5	0	0.16	0	0.01	the wall.	No	No	64/10	++	Yes central	surrounding
											the neoplasm 1-2; L, PC
6	>50	0.34	0.49	0.70	cystic	No	No	13/10	+	No	surrounding
											cystic structure

IHC: immunohistochemistry; H&E: hematoxylin and eosin staining. SCC: squamous cell carcinoma; BCC: basal cell carcinoma; IKA, infundibular keratinizing acanthoma; PM, pilomatricoma; TB, trichoblastoma; TE, trichoepithelioma; and TL, tricholemmoma. IRS: inner root sheath; ORS: outer root sheath. Diff.: differentiation. WD: well differentiated; MD: moderately differentiated; PD: poorly differentiated. Inflammatory cells: L: lymphocytes; PC: plasma cells; N: neutrophils. Grade of inflammation: 0: none/minimal; 1: mild; 2: moderate; 3: severe; 4: marked. Apoptosis score applied:

-: none; -/+: scattered, rare apoptotic cells (<5%); +: about 5%; ++: 6–10%; +++: more than 10% of apoptotic cells in a 20X field (evaluated in 10 20× fields). IHC results: for each sample, Sox9 positive cells were analyzed in 10 HPF (40×) and based on the protein expression levels 5 ranges were made: absent (0): no positive cells; low: >0%-<10% positive cells; moderate: \geq 10%-<25% positive cells; high: \geq 25%-<50% positive cells; very high: \geq 50% positive cells. RT-qPCR results: Reactions were performed in triplicate and relative amount of cDNA was normalized to a reference gene. Fold changes were calculated based on expression in normal skin (n = 3).

Supplementary file 1. Immunofluorescence protocol.

Sections were deparaffinized and rehydrated by passage through xylene and graded ethanols. Antigen retrieval was carried out in either Sodium Citrate buffer (self made) pH 6.0 for 20 min at 80 °C or in TrisEDTA buffer (self made) pH 9.0 for 15 min in a pressure cooker. Non-specific background was blocked using 5% dried skim milk in PBS. Subsequently, primary anti-Lgr6 antibody were diluted in Dako REALTM Antibody Diluent (S2022, Dako, Baar, Switzerland) and applied for 60 min at room temperature or overnight +4 °C. After primary antibody incubation, slides were incubated with Alexa fluor conjugated goat anti-rabbit secondary antibody (1:200) (SigmaAldrich, St. Louis, MO, USA) for 30 min at room temperature. After washing steps, slides were incubated for 2 min with DAPI solution (SigmaAldrich, St. Louis, MO, USA) at room temperature and then mounted and visualized in a fluorescence microscope. No immunofluorescence was detected in any of the experiments performed, neither in the tested samples nor in the included positive controls (human normal skin and canine trichoblastoma).