Supplementary Figure legends

Supplementary Figure 1. Anti-Gas6 treatment reduces metastasis.

(A) Immunohistochemical staining of phospho-AXL in normal pancreas tissue, pancreatic tumors treated with IgG (control) or anti-Gas6 antibody. Scale bars 100 μm.

(B) Immunoblotting of FC1242zsGreen tumour cells for phospho-AXL expression, detected, as expected at 140kDa. (C) Metastatic incidence, measured by bioluminescent signalling (IVIS imaging technology) in lungs, livers and lymph nodes of control and anti-gas6 treated mice. (D) Quantification of metastasis in lungs, livers, and mesenteric lymph nodes, by ex-vivo bioluminescent signalling (IVIS imaging technology) (E) Immunohistochemical staining of CK19 in lung metastasis from mice treated with IgG (control) or anti-Gas6 antibody. Scale bar 50 μm. (F) Quantification of number of lung metastatic foci per mouse treated with control IgG or anti-Gas6 antibody identified by CK19 staining. *** p ≤ 0.001, using unpaired student T test, error bars represent SEM (n=6 IgG treatment group, n= 7 anti-Gas6 treatment group).

(G) Average size of pulmonary metastatic lesions in mice treated with control IgG or anti-Gas6 antibody identified by CK19 staining. ** p ≤ 0.01, using unpaired student T test, error bars represent SEM (n=6 IgG treatment group, n=7 anti-Gas6 treatment group).

Supplementary Figure 2. Gating strategy used to FACS-sort tumor cells, tumor associated macrophages and stromal cells from PDA tumors.

(A) FACS gating strategy of murine orthotopic PDA tumours for tumor cells (Sytox-, CD45-, zsGreen+), non-immune stromal cells (Sytox-, CD45-, zsGreen-), M1-like macrophages (Sytox-, CD45+, F4/80+, CD206-) and M2-like macrophages (Sytox-,
CD45+, F4/80+, CD206+). (B) qPCR analysis of αSMA expression relative to GAPDH in FACS sorted M1-like and M2-like macrophages, stromal cells and tumor cells. Values shown are the mean and SD (n=3).

**Supplementary Figure 3. Gas 6 blockade in pancreatic tumors does not affect angiogenesis or collagen deposition.**

(A) Images of whole scanned pancreatic tumors from control and anti-Gas6 treated mice stained for CD31. (B) Quantification of CD31+ staining in total tumor area. Values shown are the mean and SEM (n=3 per treatment group). n.s. no statistically significant differences, using unpaired student T test. (C) Images of whole scanned pancreatic tumors from control and anti-Gas6 treated mice stained with picrosirius red. (D) Quantification of picrosirius red+ staining in total tumor area. Values shown are the mean and SEM (n=7 per treatment group). n.s. no statistically significant differences, using unpaired student T test. (E) Images of whole scanned pancreatic tumors from control and anti-Gas6 treated mice stained with αSMA. (F) Quantification of αSMA + staining in total tumor area. Values shown are the mean and SEM (n=7 per treatment group). n.s. no statistically significant differences, using unpaired student T test.

**Supplementary Figure 4. SPADE analysis of CyTOF analysed pancreatic tumors.**

(A) Table of heavy metal-conjugated antibodies (from Fluidigm) used for CyTOF analysis. (B) Control IgG treated and anti-Gas6 treated mice SPADE tree figures of
CD45+ immune cells. Manual gating identified myeloid cells (MHCII+, CD11b+) monocytes (Ly6C high/Ly6G low), neutrophils (Ly6C low/Ly6G high), M1-like macrophages (F4/80+, CD68+), M2-like macrophages (F4/80+, CD206+) and T cells (CD3+): T helper (CD4+), Cytolytic T cells (CD8+) and T regulatory cells (CD25+). Key for each SPADE tree indicates node size and color, and are both representative of cell number per node.

**Supplementary Figure 5. Anti-Gas6 treatment does not alter myeloid cell or T cell in the peripheral blood.**

(A) FACS analysis of control IgG and anti-Gas6 treated mice peripheral blood (n=8 per treatment group) for the presence of myeloid cells (CD11b+), monocytes (Ly6C high/Ly6G low) and neutrophils (Ly6C low/Ly6G high). Values shown are the mean and SEM (n=8). n.s. no statistically significant differences, using unpaired student T test. (B) T cell populations: pan-T cell (CD3+), T helper cells (CD4+) and cytotoxic T cells (CD8+). Values shown are the mean and SEM (n=8). n.s. no statistically significant differences, using unpaired student T test.

**Supplementary Figure 6. Anti-Gas6 treatment does not alter myeloid cell or T cell levels in the lungs**

(A) FACS analysis of Control IgG and anti-Gas6 treated mice lung metastasis (n=5 per treatment group) for presence of myeloid cells (CD11b+), monocytes (Ly6C high/Ly6G low+) and neutrophils (Ly6C low/Ly6G high+). Values shown are the mean and SEM (n=4). n.s. no statistically significant differences, using unpaired student T test. (B) T cell populations: pan-T cell (CD3+), T helper cells (CD4+) and cytotoxic T
cells (CD8+). Values shown are the mean and SEM (n=4). n.s. no statistically significant differences, using unpaired student T test. Error bars show SD (n=4).

**Supplementary Figure 7. Anti-Gas6 treatment does not increase NK cell numbers in primary pancreatic tumors.**

Representative immunohistochemical staining of NK cells in primary pancreatic tumors from mice treated with control IgG or anti-Gas6 antibody (n=6). Scale bar, 100 μm. Black arrows indicate NK cells.

**Supplementary Figure 8. Warfarin treatment reduces metastasis and reduces vimentin expression in pancreatic tumours**

(A) Immunohistochemical staining of phospho-AXL in pancreatic tumors from mice treated with normal water (control) or warfarin in drinking water (B) Metastatic incidence, measured by bioluminescent signalling (IVIS) in lungs, livers and lymph nodes of control and warfarin treated mice. (C) Quantification of metastasis to the lungs, liver and lymph nodes in by bioluminescent imaging (IVIS). (D) Representative immunofluorescent images of vimentin staining at the periphery of pancreatic tumors from control and warfarin treated mice. The dashed lines highlight the areas quantified. (E) Quantification of vimentin protein expression levels in pancreatic tumors. Data are displayed as mean and SEM and represent 5 images per mouse, with 7 animals per treatment group. * p ≤0.05 using unpaired student T test.