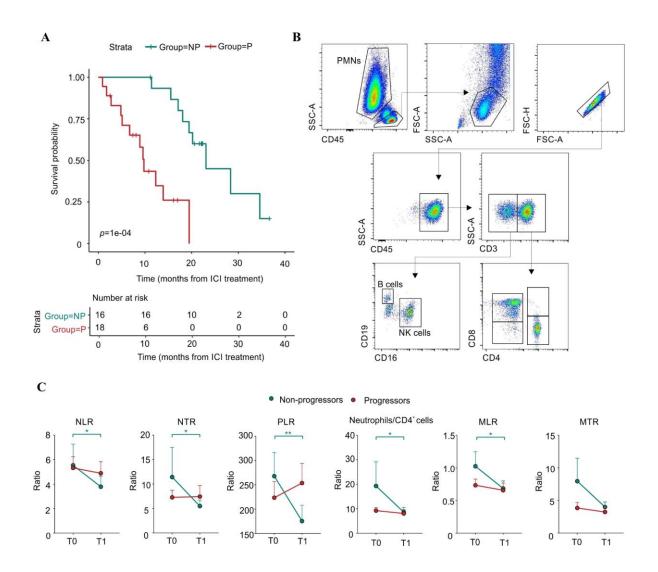
Supplementary material of manuscript ONCOIMM-20230220

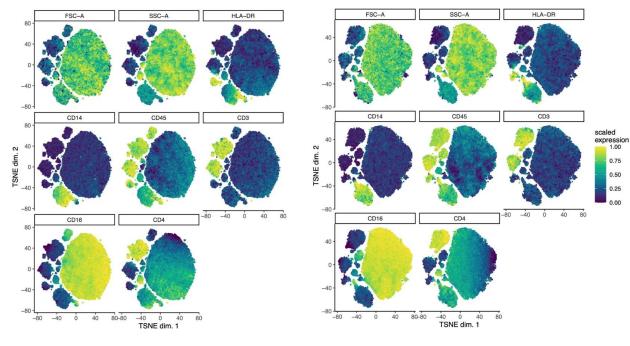
Supplementary Figure 1.



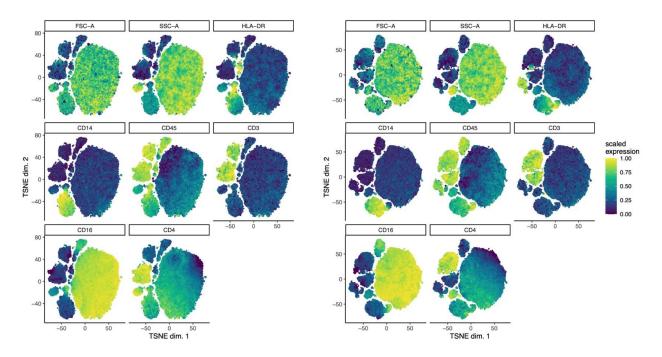
Supplementary Figure 1. Overall survival and immunological parameters evaluation in ICI-treated NSCLC patients. (**A**) Kaplan–Meier curves reporting the overall survival (OS, calculated from the date of start of ICI-treatment) of NSCLC patients (n=34) stratified by the clinical response to ICI treatment as non-progressor (NP, green) and progressor (P, red). (**B**) Representative gating strategy of flow cytometry analysis used for PMNs and lymphocyte subsets evaluation in fresh whole blood from NSCLC patients. (**C**) Neutrophil-to-lymphocyte (NLR), neutrophil-to-T lymphocyte (NTR), platelet-to lymphocyte (PLR), neutrophil-to-CD4⁺ lymphocyte, monocytes-to- lymphocyte (MLR), and monocytes-to- lymphocyte (MTR) ratios calculated by using circulating cell count in non-progressor (NP, green) and progressor (P, red) NSCLC patients before (T0) and after (T1) ICI treatment (n=34). Mann-Whitney and Wilcoxon test. Data are shown as the mean \pm SEM. *p < 0.05, **p < 0.01. Stars and lines related to statistical analyses are indicated in: red for comparison between T0 and T1 in Progressor (P) patients; green for comparison between T0 and T1 in Non-Progressor (NP) patients; black for comparison between P and NP patients at either T0 (left) or T1 (right), respectively.

Supplementary Figure 2.



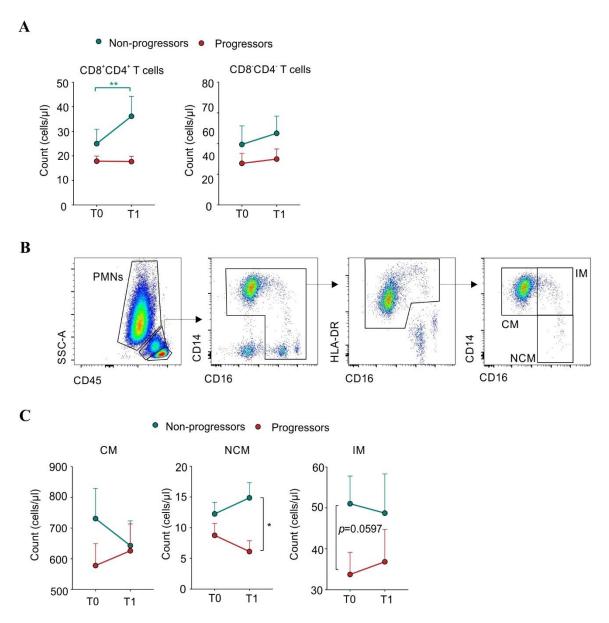


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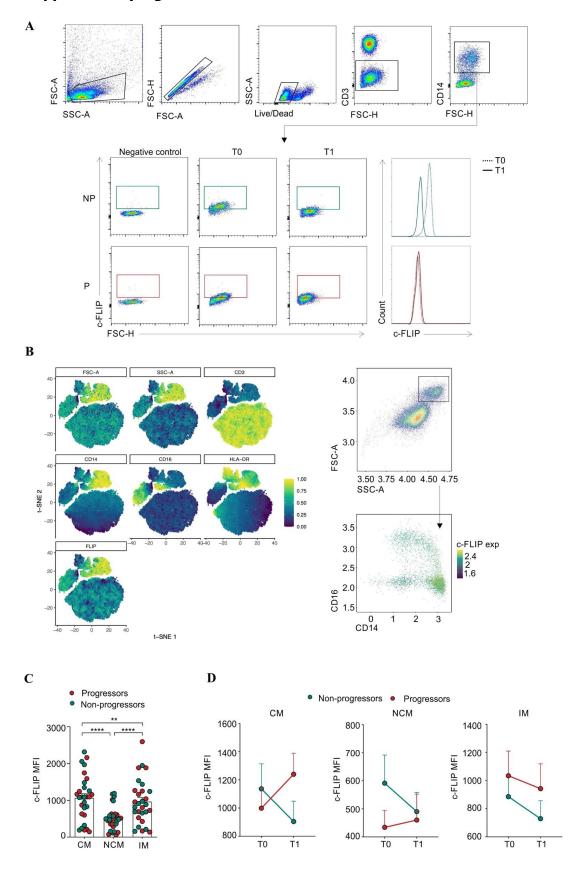
Supplementary Figure 2. Marker's expression on different subsets in t-SNE representation in NSCLC patients before and after ICI immunotherapy. *t*-SNE representation with the scaled expression of single markers used to annotate the cell clusters in (**A**) non-progressor patients at T0 (left) and T1 (right) and (**B**) progressor patients at T0 (left) and T1 (right).

Supplementary Figure 3.



Supplementary Figure 3. Evaluation of specific T lymphocyte and monocyte subsets in NSCLC patients before and after ICI immunotherapy. (**A**) Circulating CD8⁺CD4⁺ and CD8⁻CD4⁻ T cell count in the whole blood from non-progressor (NP, green line) and progressor (P, red line) NSCLC patients before (T0) and after (T1) ICI treatment (T0-P, n=16; T1-P, N=9, T0-NP, n=15, T1-NP, n=15). (**B**) Representative gating strategy of flow cytometry analysis used for monocyte subsets evaluation in fresh whole blood from NSCLC patients. (**C**) Circulating CM, NCM, and IM cell count in whole blood from non-progressor (NP, green) and progressor (P, red) NSCLC patients before (T0) and after (T1) ICI treatment (T0-P n=16, T1-P n=9, T0-NP n=15, T1-NP n=15). Mann-Whitney and Wilcoxon test. Data are shown as the mean \pm SEM. *p < 0.05, **p < 0.01. CM: classical monocytes, NCM: non-classical monocytes, IM: intermediate monocytes.

Supplementary Figure 4.



Supplementary Figure 4. c-FLIP expression in M-MDSCs and monocyte subset in NSCLC patients before and after ICI immunotherapy. (A) Representative gating strategy of flow

cytometry analysis used for circulating c-FLIP expressing CD14⁺ cell evaluation in PBMCs isolated from NSCLC patients. (**B**) *t*-SNE representation with the scaled expression of single markers including c-FLIP (left). Gating strategy to extrapolate monocytic cells to assess c-FLIP expression by using the functions 'rectangleGate' and 'filter' of the 'flowCore' package (left). (**C**) c-FLIP expression evaluated by FACS analysis and reported as mean fluorescence intensity (MFI), FMO (fluorescence minus one) corrected, in circulating CM, NCM, and IM of non-progressor (NP, green) and progressor (P, red) NSCLC patients before (T0) ICI treatment. (**D**) c-FLIP expression evaluated by FACS analysis and reported as mean fluorescence intensity (MFI), FMO (fluorescence minus one) corrected, in circulating CM, NCM, and IM of non-progressor (NP, green) and progressor (P, red) NSCLC patients before (T0) and after (T1) ICI treatment. Mann-Whitney and Wilcoxon test. Data are shown as the mean \pm SEM. *****p < 0.0001. CM: classical monocytes, NCM: non-classical monocytes, IM: intermediate monocytes.