







**Table A: Summary of the cohorts.**



# **Fig. A: Dynamics of the post-rebound setpoint viral load broken down by cohort.** # Timeweighted set-point viral loads were averaged over shorter time intervals for some animals. Descriptive statistics and statistical comparisons of the groups treated on different days are summarised in the tables below:

### **A. Cohort 1.**





#### **B. Cohort 2.**





## **C. Cohort 3.**







**Fig B: The simultaneous fit of function (2) to log<sup>10</sup> setpoint and peak viral load after rebound.** Function (2) fitted to both setpoint and peak viral loads with the same parameters except for the maximal value,  $b_0$  suggests that peak is approximately 10-fold higher than setpoint independent of the timing of ART initiation (shift on Y-axes is equal to 0.98  $log_{10}$  c/ml).

Function (2) fitted with independent parameters for both datasets does not have a statistically better fit (F-Test's *p*-value = 0.91). The best-fit parameters for both models are in Table B



**Table B: The best-fit parameters of the piecewise regression (equation (2)) fitted to the different datasets.** The model with different parameters for each dataset does not fit better than the model where only  $b_0$ -s are different for setpoint and peak dataset, as determined by the F-test, p-value =0.91.



**Table C: Corrected AIC for models that differ between datasets of setpoint and peak viral load by parameters shown.** The model where the only different parameter is *b<sup>0</sup>* has better fit according to AICc (Fig B and Table B).



### **Fig C: Prediction of setpoint viral load using a 2-variable model.**

A. For animals treated before day 20, timing of ART initiation is the strongest predictor of postrebound setpoint VL (Fig 2D, main text). Adding data on the viral load at treatment initiation into the model did not significantly improve the fit (adjusted  $R^2$ =0.15 vs 0.13, p-value comparing model with day only and  $(day + VL) = 0.17$ ).

B. For animals treated after day 20, viral load at treatment initiation is a good predictor of rebound setpoint viral load (Fig 2E, main text). Adding day of treatment as a factor significantly improves prediction (adjusted  $R^2$ =0.51 vs adjusted  $R^2$ =0.4, p-value comparing VL only with (VL + day) models <0.0001).



**Fig D: Relationship between early post-rebound viral parameters and later setpoint viral loads. A-C. Relationship between post-rebound peak and setpoint viral load.**



### **D-F. Relationship between post-rebound viral growth rate and setpoint viral load.**





**Fig E: Latent proviral reservoir by cohorts.** (A, B) SIV DNA copies per million PBMC and (C, D) SIV RNA copies per million PBMC are negatively correlated with post-rebound control in groups from Cohort 1 (A, C) (Spearman r= -0.59, *p*=0.03 for DNA, and r=-0.77, *p*=0.002 for RNA), suggesting that larger reservoir size was associated with lower post-rebound setpoint viral load. However, no significant correlation was observed in data from Cohort 2 (B, D).



Time until loss of control (days post viral detection)

**Fig F: Duration of post-rebound viral control.** (A-C) The proportion of animals maintaining viral loads below 10,000 copies per ml over time post-rebound separated by cohort. The duration of control is significantly different between ART initiation groups in 2 of the 3 cohorts (p-values for the Log-rank test are shown in the figures).

(D-F) The Duration of post-rebound viral control below 1,000 copies per ml. (D) The proportion of animals maintaining viral control below 1,000 copies per ml is not significant (p-values for the Logrank test are shown in the figures).

(E) Animals that have a low peak of the viral load during early rebound are more likely to maintain viral control below 1,000 copies per ml. (F) There is a trend for low viral growth rate during posttreatment rebound to be associated with longer-term control of post-rebound viral loads (not significant when considering four different levels of growth as shown, p = 0.073). However, comparing groups with the growth rate <1 and ≥1, we observed significant differences in the duration of control - p-value = 0.0085.

Coloured stars indicate groups where all animals had viral loads greater than 10,000 copies per ml (A) or 1,000 copies per ml (E) at day 30 post-detection. In order to avoid the initial post-rebound peak of viral load in the analysis of the duration of viral control, the first 30 days after detection of virus are ignored (shaded grey).



**rebound setpoint viral load according to the model defined by formula (3).** Increasing exposure to virus before treatment leads to an initial decrease in post-rebound setpoint viral load (consistent with the priming of immune responses). However, further exposure to virus before treatment leads to increasing post-rebound setpoint viral load (consistent with immune exhaustion and/or viral escape). Prolonged treatment is associated with increased setpoint viral load post-rebound, which can be explained by the decline of immune memory and/or immune exhaustion due to exposure to low levels of viral antigen. We assume that setpoint at primary infection corresponds to the point when the day of treatment is equal to 0.







**Fig H: No statistically significant difference in the studied parameters in vaccinated (cohort 2) or treated with immune checkpoint blockade (cohort 3) subgroups and control subgroups.** Cohort 2, macaques treated with ART on days 6-9 and 42 (A-H) and cohort 3, macaques treated with ART on day 60 (I-M). No statistically significant difference between the median of vaccinated (cohort 2) or treated with ICB (cohort 3) and control subgroups by Mann-Whitney test with respect to the parameters discussed in the main text such as the rebound setpoint viral load (A, D, I), rebound peak viral load (B, E, J), rebound growth rate (C, F, K), SIV cell-associated DNA and RNA measured before ART interruption in cohort 2 (G, H) or on day 28 post-treatment in cohort 3 (L, M).



**Table D. Best-fit parameter for the linear mixed effect model analysis of the relationship between the duration of treatment and the viral load setpoint at the rebound.** A comparison of models with and without random effects for slopes shows that adding random effects does not improve the fit suggesting a similar rate of decay of protection among the groups.



**Table E. Best-fit parameter for the linear mixed effect model analysis of the relationship between the duration of treatment and the viral load setpoint at the rebound.**



# **Table F. The best-fit parameters of the piecewise regression defined by formula (2).** The

regression is fitted to the setpoint and peak viral loads according to the time of treatment and the presence or absence of protective MHC-class 1 alleles. The model in this table has different *b<sup>0</sup>* for the different groups, with all other parameters the same between groups. The parameters of the model with the same *b<sup>0</sup>* are in Table B.



**Table G: Corrected AIC for models that differ by parameter shown between setpoint and peak viral load datasets with presence or absence of protective MHC-class 1 alleles.** The model with b<sub>0</sub> as the only different parameter has better fit when fitting to setpoint viral loads, however for the peak viral load the best-fit model has the same parameters for datasets with the presence or absence of protective MHC-class 1 alleles.



**Table H: Summary of correlation analysis of parameters discussed in the main text of the manuscript.** 

### **Supplementary method.**

## **Estimation of the duration of control**

In order to estimate the duration of control, i.e. duration of VL below a nominated control threshold (CT), we ignore the initial 30 days post detection of virus (let us call the time after these 30 days a post-peak time - PPT) and we do not count these 30 days toward the estimate of the duration of control. The definition of the duration of control is based on 6 possible scenarios. The first three scenarios concern animals with at least two VL measurements during PPT:

- 1) We consider that the control is lost if two consecutive measurements during PPT are above the CT of 4 log<sub>10</sub> copies/ml. We define the loss of control to be at the first of the two measurements above CT, and the duration of control = first measurement above CT – 30. If the first and the second measurements during PPT are above CT, then the duration of control is defined as 0.
- 2) If the viral load does not exceed the threshold for two consecutive measurements during PPT and the last follow up time point is below CT, then we consider that control is not lost until the last measurement (inclusively) and we censor the subject at the last time point.
- 3) If there is no more than one consecutive measurement above CT during PPT and the last measurement is above the detection threshold, then we censor the animal at the second last point (as we cannot tell if control is lost at the last point).

Now, let us consider the cases when there are less than two points during PPT so we cannot apply the above criteria directly.

- 4) If there is only one measurement during PPT and the VL is less than CT, then we censor the subject at this point.
- 5) If there is only one measurement during PPT and the VL is greater than CT, then the subject is excluded from the study (as we cannot confirm if this measurement would have been followed by a second reading above the threshold).
- 6) The subject is also excluded from the study if the follow-up terminates before PPT.

## **References**

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