

LEVINE et al.

Supplement to: **LOW PANETH CELL NUMBERS AT ONSET OF GASTROINTESTINAL GVHD IDENTIFY PATIENTS AT HIGH RISK FOR NON-RELAPSE MORTALITY**

Table of Contents:

Table S1: Conditioning Regimens	2
Figure 1S: Reproducibility of Paneth cell counts.	3
Figure 2S: ROC curve for NRM by Paneth cell count.	4

## Table S1: Conditioning regimens

### Control patients (N=26):

**Full intensity (N=8):** Total body irradiation 8-12 Gy plus either cyclophosphamide 120 mg/kg, etoposide 1500 mg/m<sup>2</sup> or fludarabine 150 mg/m<sup>2</sup> (N=4); busulfan 12.8 mg/m<sup>2</sup> plus either cyclophosphamide 120 mg/m<sup>2</sup>, fludarabine 150 mg/m<sup>2</sup>, or clofarabine 80-160 mg/m<sup>2</sup> (N=4)

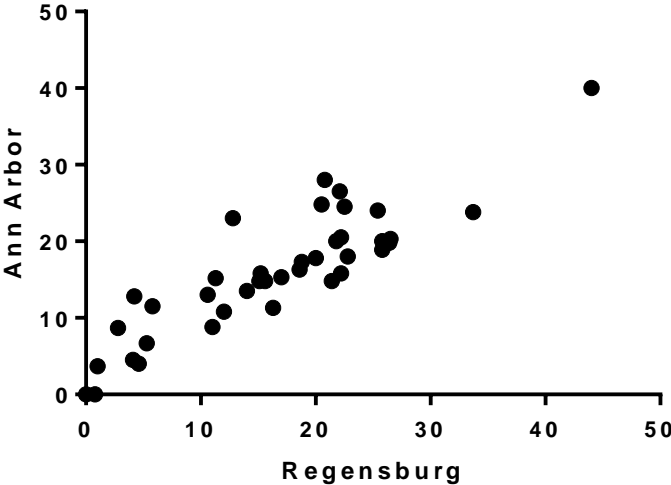
**Reduced Intensity (N=18):** Fludarabine 150 mg/m<sup>2</sup>, BCNU 300mg/m<sup>2</sup>, and melphalan 110-140mg/m<sup>2</sup> (N=6); busulfan 6.4 mg/m<sup>2</sup> and fludarabine 150 mg/m<sup>2</sup> (N=5); fludarabine 150 mg/m<sup>2</sup>, cytarabine 8000 mg/m<sup>2</sup>, and amsacrine 400mg/m<sup>2</sup> followed by cyclophosphamide 120 mg/kg and either total body irradiation 4 Gy or busulfan 10 mg/m<sup>2</sup> (N=4); fludarabine 150mg/m<sup>2</sup> and treosulfan 42 mg/m<sup>2</sup> (N=2); fludarabine 150mg/m<sup>2</sup>, cyclophosphamide 60 mg/kg, and total body irradiation 2 Gy (N=1)

### Study Patients (N=116):

**Full intensity (N=58):** Busulfan 12.8 mg/m<sup>2</sup> plus either cyclophosphamide 120 mg/m<sup>2</sup>, fludarabine 150 mg/m<sup>2</sup>, or clofarabine 80-160 mg/m<sup>2</sup> (N=40); total body irradiation 8-12 Gy plus either cyclophosphamide 120 mg/kg, fludarabine 150 mg/m<sup>2</sup>, or melphalan 140 mg/m<sup>2</sup> (N=9), cyclophosphamide 7200 mg/m<sup>2</sup>, etoposide 1600 mg/m<sup>2</sup>, and carmustine (BCNU) 450 mg/m<sup>2</sup> (N=9)

**Reduced Intensity (N=58):** Busulfan 6.4 mg/m<sup>2</sup> and fludarabine 150 mg/m<sup>2</sup> (N=29); fludarabine 150mg/m<sup>2</sup>, BCNU 300mg/m<sup>2</sup> and melphalan 110-140mg/m<sup>2</sup> (N=12); fludarabine 150mg/m<sup>2</sup> plus either melphalan 140 mg/m<sup>2</sup> or treosulfan 42 mg/m<sup>2</sup> (N=9); fludarabine 150mg/m<sup>2</sup>, cytarabine 8000 mg/m<sup>2</sup>, and amsacrine 400mg/m<sup>2</sup> followed by cyclophosphamide 120 mg/kg and either total body irradiation 4 Gy, busulfan 10mg/m<sup>2</sup>, or treosulfan 42 mg/m<sup>2</sup> (N=7); antithymocyte globulin and cyclophosphamide 120 mg/m<sup>2</sup> (N=1)

**Figure 1S. Reproducibility of Paneth cell counts.** The inter-rater correlation of mean Paneth cell counts/high powered field (n=41) was  $r^2=0.81$  ( $p<0.0001$ ).



**Supplemental Figure 2. ROC curve for NRM by Paneth cell count.** The area under the curve is 0.68. The sensitivity (60%) and specificity (75%) for a threshold of a mean of 4 Paneth cells/hpf is shown by the thin lines.

