SUPPLEMENTAL TABLE 1

Patients considered by the adjudication committee as true visceral leishmaniasis (VL) cases despite negative or not done parasitological exam

Patient	Sex, age (years)	CD4 count cell/mm^3	Previous VL	Fever	Hg (g/dL)	Leukocyte count (cell/L)	Platelet count (cell/L)	Spleen (cm in left midclavicular line)	Therapy used	rK39 dipstick test	RIFI title	DAT-LPC title	Parasitological exam in bone marrow	qPCR	Clinical improvement after therapy
1	M, 39	35	No	Yes	8.1	1,600	82,000	2	Pentavalent antimonial	Neg	1:80	1:102,400	Neg	Neg	Yes
2	F, 28	17	Yes	Yes	8.6	1,600	200,000	2	d-AMP (toxicity), L-AMP	Neg	Neg	1:100	Neg	Pos	Yes
3	M, 56	9	No	Yes	8.7	500	83,000	3	d-AMP	Neg	1:80	1:100	Neg	Neg	No
4	F, 34	6	Yes	Yes	7.6	800	172,000	8	d-AMP	Pos	1:160	1:12,800	Not done	Neg	Abandoned treatment/died
5	F, 44	129	No	Yes	8.8	1,900	128,000	6	d-AMP (toxicity), L-AMP	Pos	1:40	1:12,800	Not done	Not done	Yes
6	M, 36	265	No	Yes	9.9	2,400	213,000	0	d-AMP	Neg	1:320	1:102,410	Neg	Pos	Yes

d-AMP = amphotericin B deoxycholate; DAT-LPC = a direct agglutination test using a prototype kit produced at CPqRR; F = female; IFAT = indirect fluorescent antibody test; L-AMP = liposomal amphotericin B; M = male; neg = negative; pos = positive; qPCR = real-time polymerase chain reaction for *Leishmania infantum*; rK39 dipstick test = rapid recombinant K39 antigen-based immunochromatographic test.