

Figure S1. Percentage changes from baseline to 6 months of ECP treatment in mSWAT and circulating malignant T cells in 18 L-CTCL patients. The modified skin-weighted assessment tool (mSWAT) (a) and circulating malignant T cells by flow cytometry (b) were assessed for each patient at baseline to 6 months after ECP treatment. The percentage change at 6 months from baseline was calculated for each patient. PR: partial responders (#2, #5, #6, #7, #10, #11, #14, and #16); MR: minor responders (#1, #8, #17, and#18). SD: stable disease (#4, #9, and #15); PD: progressive disease (#3, #12, and #13).

Table S1 Clinical characteristics of L-CTCL patients in this study

Patient #	Age/Gender/Race	Stage	TCR vβ (%)	mSWAT	Circuiting tumor T cells*		ECP Cycles	Additional		Respon	ise
			-		%	/µl		Therapy	Skin	Blood	Overall
1	58/F/C	IVA	Vβ (70.0)	63.0	64.2	1751.0	7	Bexarotene IFN-α	MR	SD	MR
2	66/M/C	IIIB	Vβ22 (91.0)	100.0	82.2	413.0	10	Bexarotene IFN- α	PR	CR	PR
3	71/M/AA	IVB (HTLV-1+)	n/a	100.0	55.5	525.0	7	Bexarotene IFN- α	SD	PD	PD
4	54/M/C	IVA	Vβ17 (54.0)	39.0	20.6	69.0	7	-	SD	SD	SD
5	74/F/C	IVB	Vβ (85.0)	93.0	89.9	3928.0	11	Bexarotene	PR	SD	PR
6	74/M/C	IVAB	Vβ8 (73.7)	74.0	73.7	2218.0	7	-	MR	PR	PR
7	67/M/C	IVA	Vβ (83.0)	87.0	79.1	1671.0	12	Bexarotene	PR	SD	PR
8**	61/M/C	IIIB	Vβ (76.0)	77.0	64.4	227.0	25	IFN-α	SD	MR	MR
9	66/F/C	IVB	Vβ2 (97.0)	100.0	93.8	17981.0	13	Bexarotene IFN-α	SD	SD	SD
10	74/M/C	IVA	Vβ7.2 (93.0)	48.1	85.9	2752.0	11	-	PR	SD	PR
11	79/M/C	IVB (BM+)	Vβ 13.6 (97.1)	54.0	87.5	11581.0	9	Bexarotene	PR	SD	PR
12*	71/M/C	IVA	Vβ 17 (94.0)	100.0	56.0	1284.6	10	Bexarotene IFN-α	SD	PD	PD
13	78/F/AA	IVB	Vβ 13.6 (95.0)	47.0	94.5	9977.0	10	-	PD	SD	PD
14	63/M/C	IVB (BM+)	Vβ (94.0)	49.0	94.7	22751.0	10	IFN-α	PR	SD	PR
15	73/M/C	IVA	Vβ 18.0 (95.0)	47.0	77.1	2600.0	10	Bexarotene	SD	SD	SD
16	67/F/C	IVA	n/a	67.0	91.9	4300.0	6	Bexarotene	PR	SD	PR
17	63/M/C	IVA	Vβ 5.1 (95.0)	5.0	91.7	5139.0	6	-	MR	SD	MR
18	61/M/C	IVB	Vβ 7.1 (97.0)	87.0	91.7	5500.0	8	-	MR	SD	MR

M:male, F:female, C:Caucasian, AA: African American, mSWAT: modified severity weight assessment tool; ECP: extracorporeal photopheresis, n/a: not available; CR: complete response; PR: partial response, MR: minimal response, SD: stable disease, PD: progressive disease; HTLV-1:Human T Lymphotropic Virus-1, *: CD4+CD26-T cells except Patient#12 with CD4+ CD7- phenotype; **: Patient with both L-CTCL and Graft-versus-Host disease (GVHD) who underwent weekly ECP treatment

Table S2 Clinical characteristics of GVHD patients in this study

Patient #	Age/Sex/Race	Primary Disease	Type of Donor	Type of GVHD	Organs affected	Concurrent therapies	ECP cycles at 3/6 months	Clinical Response at 3 months	Clinical response at 6 months
1	60/F/C	NHL	Match unrelated	De novo chronic	Skin (sclerodermoid), Mouth	Tacrolimus Methylprednisolone	7/12	No Response	GVHD progression
2	50/M/C	NHL	Match related sibling	Acute, Grade 4 of skin	Skin	Steroids, Mycophenolate, Methylprednisolone	5/n/a stopped ECP	Skin-Partial response	n/a
3	29/M/C	CLL	Cord blood	Late acute	Skin (non- sclerodermoid), Gastrointestinal	Mycophenolate, Prednisone, Tacrolimus	14/25	No response	Partial response
4	52/M/C	CML	Match related transplant	Classic chronic	Skin (sclerodermoid), eyes, liver, lung	Steroids, Erythromycin, Prednisone	9/25	Stable disease	Eye-no response Skin-no response Lungs-partial response Liver-complete response Overall-partial response
5	62/M/C	CLL	Match unrelated	Classic Chronic	Skin(sclerodermoid) , liver, ,oral, eyes	Tacrolimus	19/43	Skin-Partial response Liver-Complete response Eye-no response Mouth-partial response	Skin - Partial response Liver-Complete response Eye -no response Mouth-partial response
6	55/F/C	SLL	Match Related Donor-from male donor	Classic chronic	Skin(sclerodermoid) , joints- fascia, mouth, liver, eye	Tacrolimus, Methylprednisolone	23/37	Skin-Progression Eye-Progression Liver-normal	Skin-minor response fascia -Improved Mouth-partial responses
7	50/M/C	CLL	Match related donor	Overlap syndrome (both chronic & acute)	Skin (scleroderma), fascia, liver, mouth	Mycophenolate , Methylprednisolone , Imatinib, Tacrolimus	n/a	Skin-Partial response Fascia-Partial response Liver-Complete response Mouth- Complete response	Skin-Partial response Fascia-Partial response Liver-Complete response Mouth- Complete response
8	23/M/C	Aplastic anemia	Match related	Late acute	Liver, skin-involved but not active	Methylprednisolone , Tacrolimus	14/n/a stopped ECP	No Response	No response-progression
9	55/F/C	AML	Match related	Classic chronic	Skin, fascia, liver, Gastrointestinal tract (acute)	Prednisone, Tacrolimus,	11/35	No response	No response
10	52/M/C	HL→ B cell lymphoma	HLA matched sibling	De novo chronic	skin (sclerodermoid), Mouth, eye, lung	Steroids, Azithromycin	21/32	Stable disease (Skin, Eyes, Lung, Mouth)	Stable disease (Eyes, Lung) Partial response (Skin, Mouth)
11	62/F/C	Myelodysplastic syndrome / follicular lymphoma	Match-sibling	Overlap syndrome- both acute & chronic	Skin (sclerodermoid, macular popular)	Tacrolimus, Methyl prednisone	23/30	Stable Disease	Stable Disease

GVHD: Graft versus Host Disease, F: Female, M: Male, C: Caucasian, ECP: Extracorporeal Photopheresis, n/a: not available, HL: Hodgkin's Lymphoma, NHL: Non-Hodgkin's Lymphoma, AML: Acute myelogenous leukemia, CLL: Chronic lymphocytic leukemia, CML: Chronic myelogenous leukemia, SLL: Small Lymphoma

Table S3 The heterogeneity of levels, ratios, and HLA-DR expression on mDCs and pDCs in L-CTCL patients

	Percentages (%)		Ra	ntio	HLA-DR expression (MFI)†		
	mDC	pDC	mDC/pDC	pDC/mDC	mDC	pDC	
L-CTCL-High							
No. of patients	1	1	3	3	0	0	
Mean \pm SD	1.33	2.12	3.04 ± 0.58	2.68±0.18	-	-	
L-CTCL-Normal							
No. of patients	5	7	15	14	2	9	
Mean ±SD	0.65±0.08	0.50 ± 0.16	1.06±0.57	0.76±0.27	3851.68±9.19	2007.42±498.81	
L-CTCL-Low							
No. of patients	12	10	0	1	16	9	
Mean ± SD	0.24±0.16	0.13±0.05	-	0.27	1678.11±702.52	984.16±199.66	

L-CTCL-High: L-CTCL patients with higher than normal levels; L-CTCL-Normal: L-CTCL patients with normal range levels; L-CTCL-Low: L-CTCL patients with lower than normal levels; †MFI: mean fluorescence intensity