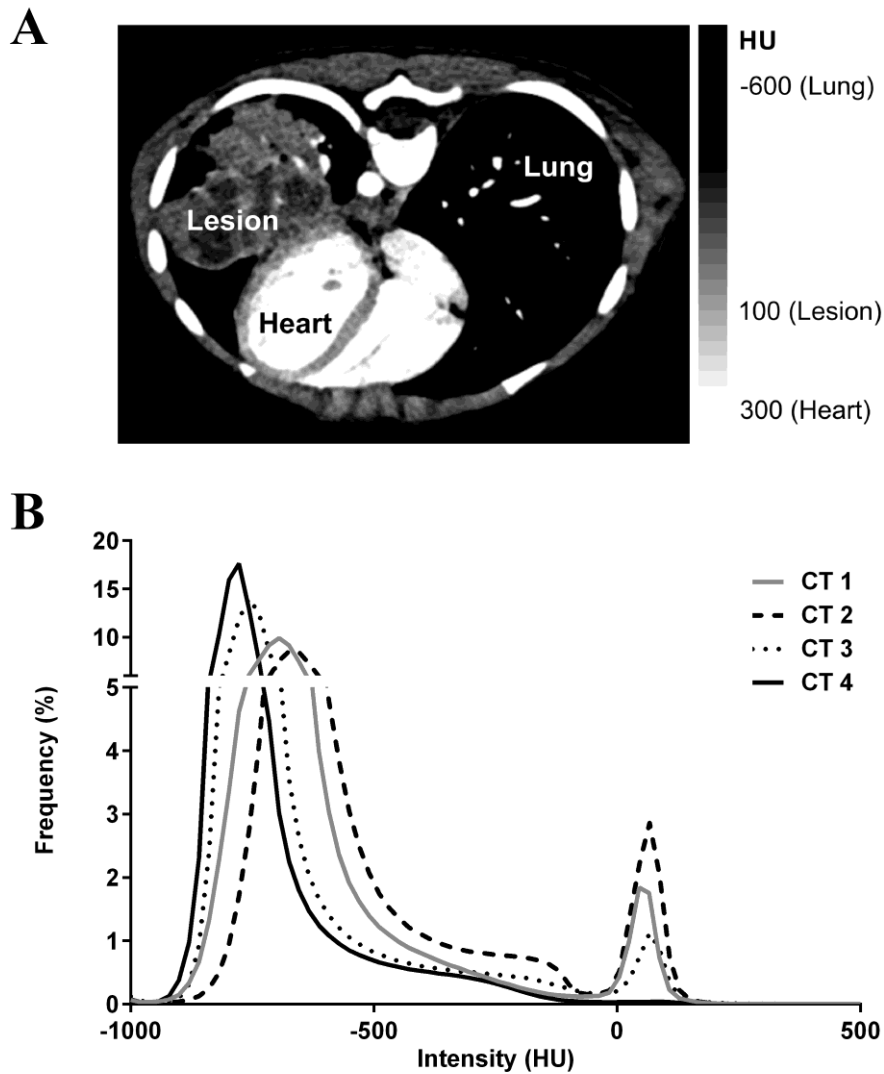


Supplementary webappendix

This webappendix formed part of the original submission and has been peer reviewed. We post it as supplied by the authors.

Supplement to: Salazar-Austin N, Ordonez AA, Hsu AJ, et al. Extensively drug-resistant tuberculosis in a young child after travel to India. *Lancet Infect Dis* 2015; **15**: 1485–91.

SUPPLEMENTARY APPENDIX



Supplementary Figure 1. Computed tomography (CT) imaging with intravenous contrast was performed on the Definition FLASH (Siemens, Malvern, PA) using a protocol customized for pediatric patients - dose modulation, lower tube voltage, iterative reconstruction. A. Transverse CT image (post-contrast, day 90), showing the Hounsfield Unit (HU) densities in the chest cavity (lung, pulmonary lesion and heart). B. Histogram showing the HU densities of the segmented CT lung images. The pulmonary lesions correspond to -15 to 210 HU (smaller peaks on the right, which decrease with treatment). Lesion volumes were calculated at each time-point by integrating the area under the corresponding curve. The lesion volumes were verified manually by drawing regions of interest. Each trace corresponds to CT performed at: initiation of first-line tuberculosis (TB) treatment (CT1, day 0), initiation of individualized extensively drug-resistant (XDR)-TB treatment (CT2, day 90), and six weeks (CT3, day 131) and six months (CT4, day 270) after initiation of XDR-TB treatment respectively.

Supplementary Movies 1-4. CT imaging. Three-dimensional views of the lung parenchyma and the pulmonary infiltrates (on the left) rotating along the z-axis are shown. Movies correspond to CT performed at: initiation of first-line tuberculosis (TB) treatment (Movie 1, day 0), initiation of individualized extensively drug-resistant (XDR)-TB treatment (Movie 2, day 90), and six weeks (Movie 3, day 131) and six months (Movie 4, day 270) after initiation of XDR-TB treatment respectively.