

FIGURE S1: Progression free survival calculated from the start of maintenance treatment until progression, relapse or death in all patients commencing maintenance treatment. Of those 53 patients who started maintenance treatment, 23 (43·4%) experienced a PFS defining event including 14 deaths due to progressive disease (N=12) and treatment related sepsis (N=2). The respective 1 and 2-year PFS was 67·9% (95% CI, 55·3% - 80·5%) and 54·4% (95% CI, 40·3% - 68·4%) calculated from start of maintenance.

During maintenance, the cumulative incidence of death due to lymphoma at 1, 2, and 3 years was 9.6% (95% CI 4.2% - 22.0%), 21.2% (95% CI 12.1% - 37.0%), and 30.2% (95% CI , 17.8% - 51.4%) respectively.

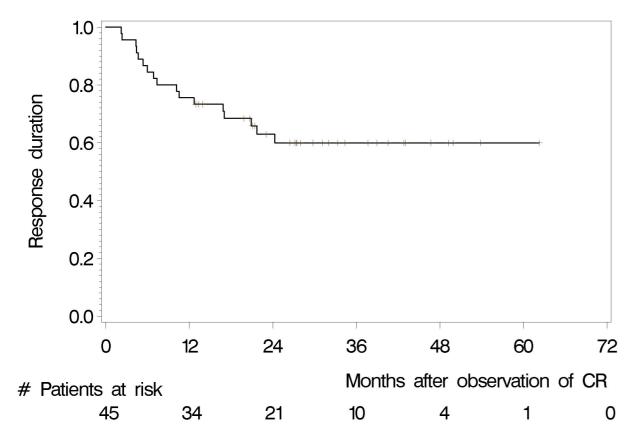


FIGURE S2: Progression free survival calculated from the date of achieving complete remission until progression, relapse or death in all patients achieving at least one CR during scheduled treatment or at the final staging after completion of 3 cycles.

Global health status

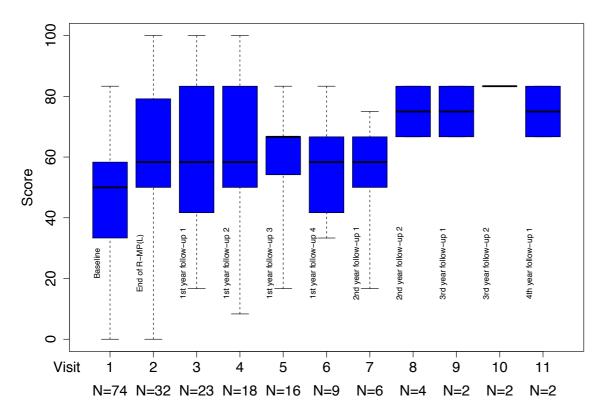


FIGURE S3: Quality of life (QoL) as evaluated by the European Organisation for Research and Treatment of Cancer QoL core questionnaire (EORTC QLQ-C30 Version 3.0) at the indicated visits over time. The lower and upper boundaries of each box represent the respective 25th and 75th percentiles of the global health status, the central lines represent the median value and the whiskers represent the minimum and maximum. During the 1st year, QoL was evaluated every 3 months, during the 2nd and 3rd year every 6 months and yearly thereafter. Before initiating treatment, the median score was 50 (interquartile range [IQR] 33 - 58), which reflects substantially impaired QoL. This increased to 58·33 (IQR 50 - 79) after finishing immuno-chemotherapy; afterwards, QoL stabilized. Adherence to QoL evaluation was low during follow-up.

Global health status

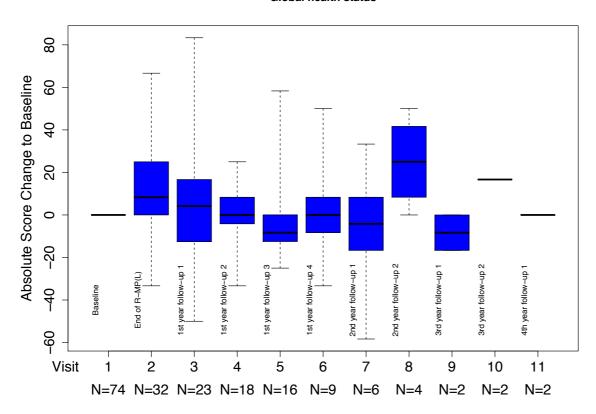


FIGURE S4: Intra-individual changes in Quality of life (QoL) as evaluated by the European Organisation for Research and Treatment of Cancer QoL core questionnaire (EORTC QLQ-C30 Version 3.0) compared to baseline at the indicated visits over time. Positive changes denote improvement. The lower and upper boundaries of each box represent the respective 25th and 75th percentiles of the global health status, the central lines represent the median value and the whiskers represent the minimum and maximum. During the 1st year, QoL was evaluated every 3 months, during the 2nd and 3rd year every 6 months and yearly thereafter.