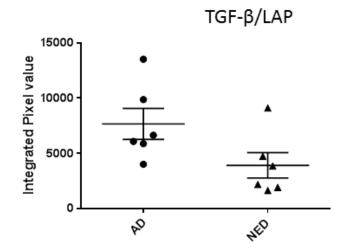
Supplemental Table 1. Clinicopathological characteristics of HNC patients enrolled in the

study

	Patients (n=38)		
	n (11–3	%	
Age (mean±SD; years)		/0	
$\leq 60 \pm 13$	19	50	
> 60 ± 13	19	50	
(range: 24-79)	15	50	
Gender			
male	29	76	
female	-9	24	
Disease status	5		
AD	19	50	
REC	4	11	
NED	15	39	
Primary tumor site	10	35	
Oral cavity	23	61	
Oropharynx	13	34	
Larynx	2	5	
Tumor stage	-	3	
T ₁	15	39	
T ₂	14	37	
T ₃	2	5	
T ₄	6	16	
Undefined	1	3	
Nodal status	-	3	
N ₀	21	55	
N ₁	4	11	
N ₂	13	34	
Distant metastasis		0.	
M ₀	38	100	
UICC stage			
	9	24	
II.	6	16	
III	4	10	
IV	18	47	
Undefined	1	3	
Tumor grade			
G ₁	3	8	
G ₂	23	60	
G ₃	1	3	
Undefined	11	29	
HPV status (p16 IHC)			
Positive	10	26	
Negative	8	21	
Undefined	20	53	
Alcohol consumption			

Current	21	56	
Former	2	5	
Never	13	34	
Undefined	2	5	
Tobacco consumption			
Current	19	50	
Former	7	18	
Never	12	32	
Therapy			
Surgery alone	19	50	
Surgery + (C)RT	18	47	
Primary CRT	1	3	

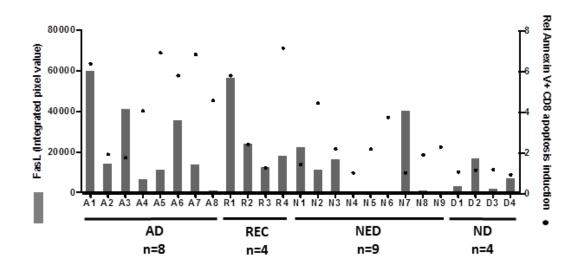
Supplemental Figure 1



Supplemental Figure 1

Densitometry results (integrated pixel values) for TGF- β /LAP in exosomes isolated from plasma of 6 HNC patients with AD and 6 with NED. Western blot bands were scanned for density as described in Materials and Methods. The bars are means ± SEM.

Supplemental Figure 2



Supplemental Figure 2

CD8+ Jurkat cells were co-incubated with exosomes isolated from –plasma of patients with HNC as described in Methods. No correlation was established between exosome-mediated apoptosis of CD8⁺ Jurkat cells and FASL levels carried by exosomes from AD, REC and NED patients or NDs.