Supplementary Material.

Temporary methotrexate discontinuation for two weeks improves immunogenicity of seasonal influenza vaccination in patients with rheumatoid arthritis: a randomized clinical trial.

Jin Kyun Park, Yun Jong Lee, Kichul Shin, Eun-Ha Kang, You-Jung Ha, Yun Jong Lee, Eun Young

Lee, Yeong Wook Song, Yunhee Choi, Kevin L Winthrop, Eun Bong Lee.

**Supplementary table 1.** Antibody titers, fold-changes and vaccine response before and after vaccination with patients according to seroprotection.

**Supplementary table 2.** Antibody titers, fold-changes and vaccine response before and after vaccination to individual vaccine strains in <u>Per-Protocol</u> population.

Supplementary figure 1. Study design.

Supplementary figure 2. Satisfactory response in Per-Protocol population

**Supplementary table 1.** Antibody titers, fold-changes and vaccine response before and after vaccination with patients according to baseline seroprotection status in <u>mITT population</u>.

	Seroprotection negative		Seroprotection positive			
	Group 1	Group 2	р	Group 1	Group 2	Р
H1N1	N= 118	N= 114		N=38	N=46	
Pre-vacc titer, GMT	9.5 (8.5 - 10.6)	9.8 (8.7 – 11.0)	0.692	59.5 (51.1 - 69.3)	56.6 (48.7 - 65.7)	0.637
ost-vacc titer, GMT	57.4 (45.7 - 72.1)	100.0 (79.2 - 126.4)	0.001	118.1 (92.4 - 150.9)	132.2 (104.3 - 167.6)	0.508
old increase, GM	6.1 (4.7 - 7.8)	10.2 (7.9 - 13.3)	0.005	2.0 (1.6 - 2.4)	2.3 (1.9 - 2.9)	0.291
esponse, n (%)	71 (60.2)	83 (72.8)	0.052	8 (21.1)	17 (37.0)	0.151
re-vacc SP, n (%)	0 (0)	0 (0)		38 (100)	46 (100)	1.000
ost-vacc SP, n (%)	81 (68.6)	92 (80.7)	0.049	37 (97.4)	46 (100)	0.268
I3N2	N=135	N=139		N=21	N=21	
re-vacc titer, GMT	7.5 (6.9 - 8.2)	8.0 (7.2 - 8.8)	0.403	69.2 (50.0 - 95.7)	69.5 (50.2 - 96.3)	0.980
ost-vacc titer, GMT	37.6 (30.4 - 46.4)	75.9 (61.4 - 93.8)	<0.001	119.5 (89.7 - 159.4)	168.6 (112.3 - 253.2)	0.158
old increase, GM	5.0 (4.0 - 6.2)	9.5 (7.6 - 11.9)	<0.001	1.7 (1.3 - 2.3)	2.4 (1.4 - 4.1)	0.235
esponse, n (%)	81 (60.0)	108 (77.7)	0.002	4 (19.0)	6 (28.6)	0.719
re-vacc SP, n (%)	0 (0)	0 (0)	0	21 (100)	21 (100)	1.000
ost-vacc SP, n (%)	76 (56.3)	105 (75.5)	0.001	21 (100)	20 (95.2)	0.312
-Yamagata	N=96	N=109		N=60	N=51	
re-vacc titer, GMT	10.7 (9.4 - 12.1)	12.6 (11.3 – 14.0)	0.045	73.4 (62.2 - 86.6)	60.9 (52.8 - 70.3)	0.096
ost-vacc titer, GMT	44.7 (34.5 - 57.8)	90.4 (72.7 - 112.4)	<0.001	145.7 (118.0 – 180.0)	195.8 (155.7 - 246.2)	0.060

Fold increase, GM	4.2 (3.2 - 5.5)	7.2 (5.8 - 8.9)	0.002	2.0 (1.6 - 2.4)	3.2 (2.6 – 4.0)	0.001
Response, n (%)	49 (51.0)	76 (69.7)	0.007	17 (28.3)	28 (54.9)	0.006
Pre-vacc SP, n (%)	96 (100)	109 (100)	1.000	60 (100)	51 (100)	1.000
Post-vacc SP, n (%)	57 (59.4)	90 (82.6)	<0.001	59 (98.3)	51 (100)	0.354
B-Victoria	N=123	N=139		N=33	N=21	
Pre-vacc titer, GMT	9.9 (8.9 - 10.9)	9.4 (8.5 - 10.3)	0.479	49.1 (43.0 - 56.1)	49.7 (41.0 - 60.3)	0.910
Post-vacc titer, GMT	33.3 (27.4 - 40.5)	57.8 (49.3 - 67.8)	<0.001	74.7 (57.2 - 97.6)	165.0 (118.0 - 230.5)	<0.001
Fold increase, GM	3.4 (2.8 - 4.1)	6.2 (5.2 - 7.3)	<0.001	1.5 (1.2 - 2)	3.3 (2.5 - 4.4)	<0.001
Response, n (%)	60 (48.8)	104 (74.8)	<0.001	4 (12.1)	14 (66.7)	<0.001
Pre-vacc SP, n (%)	0 (0)	0 (0)	1.000	33 (100)	21 (100)	1.000
Post-vacc SP, n (%)	64 (52.0)	100 (71.9)	<0.001	31 (93.9)	21 (100)	0.250

Data are expressed in n (%) or value (95% CI). Antibody titers and fold increase are in geometric mean titer (GMT). Satisfactory vaccine response (i.e. response = seroconversion) was defined as a  $\geq$ 4-fold improvement in titers relative to baseline. Seroprotection was defined as titers of  $\geq$ 1:40. P values were generated by independent t-test for continuous variables and chi-square test for categorical variables.

CI, confidential interval; GM, geometric mean; GMT, geometric mean titer; n, number; Pre-SP, prevaccination seroprotection rate; Post-SP, postvaccination seroprotection rate.

	MTX continue	MTX hold	
	(n=154)	(n=157)	Р
H1N1			
Pre-vacc titer, GMT (95% Cl)	14.8 (12.7 - 17.3)	16.2 (13.9 - 18.9)	0.329
Post-vacc titer, GMT (95% CI)	68.4 (56.8 - 82.4)	108.4 (90.7 - 129.5)	0.001
old increase, GM (95% CI)	4.6 (3.7 - 5.7)	6.7 (5.4 - 8.3)	0.035
Response, n (%)	78 (50.6)	97 (61.8)	0.048
Pre-vacc SP, n (%)	37 (24.0)	46 (29.3)	0.293
Post-vacc SP, n (%)	116 (75.3)	135 (86.0)	0.017
H3N2			
Pre-vacc titer, GMT (95% CI)	10.2 (8.8 - 11.8)	10.6 (9.1 - 12.3)	0.755
Post-vacc titer, GMT (95% CI)	43.9 (36.1 - 53.4)	84.3 (69.3 - 102.4)	<0.001
Fold increase, GM (95% CI)	4.3 (3.5 - 5.3)	8 (6.4 - 9.9)	<0.001
Response, n (%)	83 (53.9)	111 (70.7)	0.002
Pre-vacc SP, n (%)	21 (13.6)	20 (12.7)	0.815
Post-vacc SP, n (%)	97 (63.0)	123 (78.3)	0.003
3-Yamagata			
Pre-vacc titer, GMT (95% CI)	22.4 (18.7 - 26.7)	20.8 (18.1 - 24)	0.720
Post-vacc titer, GMT (95% CI)	70.4 (57.8 - 85.7)	115.6 (97.4 - 137.3)	<0.001
Fold increase, GM (95% CI)	3.1 (2.6 - 3.8)	5.6 (4.7 - 6.6)	<0.001
Response, n (%)	66 (42.9)	101 (64.3)	<0.001
Pre-vacc SP, n (%)	59 (38.3)	51 (32.5)	0.283
Post-vacc SP, n (%)	115 (74.7)	139 (88.5)	0.002

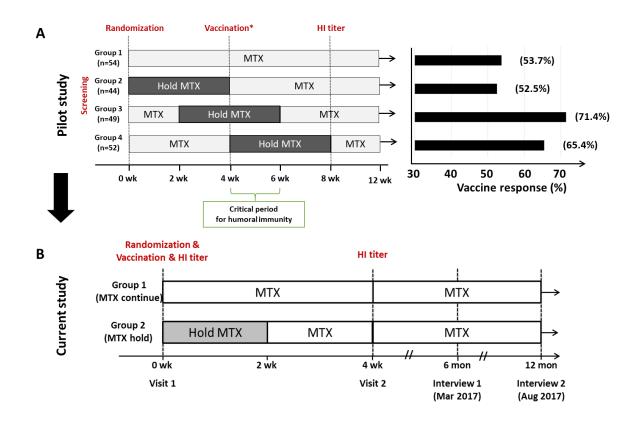
**Supplementary table 2.** Antibody titers, fold-changes and vaccine response before and after vaccination to individual vaccine strains in <u>Per-Protocol</u> population.

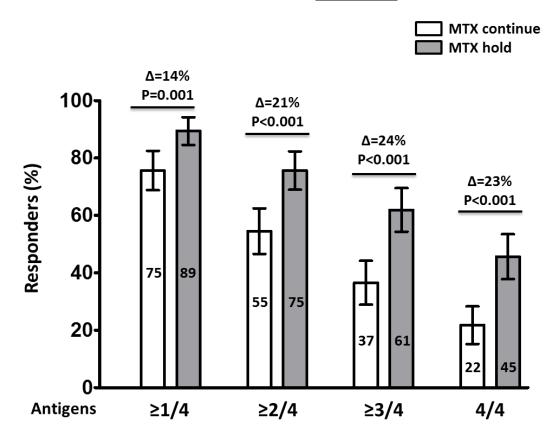
## **B-Victoria**

Pre-vacc titer, GMT (95% CI)	13.8 (12.1 - 15.8)	11.7 (10.3 - 13.2)	0.083
Post-vacc titer, GMT (95% CI)	39.5 (33.3 - 46.9)	66.3 (56.8 - 77.4)	<0.001
Fold increase, GM (95% Cl)	2.9 (2.4 - 3.4)	5.7 (4.9 - 6.7)	<0.001
Response, n (%)	64 (41.6)	115 (73.2)	<0.001
Pre-vacc SP, n (%)	32 (20.8)	21 (13.4)	0.083
Post-vacc SP, n (%)	94 (61.0)	119 (75.8)	0.005

Data are expressed in n (%) or value (95% CI). Antibody titers and fold increase are in geometric mean titer (GMT). Satisfactory vaccine response (i.e. response = seroconversion) was defined as a  $\geq$ 4-fold improvement in titers relative to baseline. Seroprotection was defined as titers of  $\geq$ 1:40. P values were generated by independent t-test for continuous variables and chi-square test for categorical variables.

CI, confidential interval; GM, geometric mean; GMT, geometric mean titer; n, number; Pre-SP, prevaccination seroprotection rate; Post-SP, postvaccination seroprotection rate. **Supplementary figure 1. Study rationale and design.** (A) A pilot study was conducted to estimate the efficacy and time of temporary MTX discontinuation to improve vaccine response. Group 2, where MTX was discontinued before vaccination, did not improve in vaccination response, suggesting that MTX discontinuation before the vaccination did not affect vaccine response. Groups 3 and 4, where MTX was stopped after vaccination, did show higher vaccine response than the reference group 1 (MTX continue group). Therefore, the "overlapping" 2 weeks after vaccination in Groups 3 and 4 is the critical period for vaccine response. (B) In this trial, patients were randomized to continue or hold MTX for 2 weeks after vacciation. HI=hemaggluination inhibition; MTX=methotrexate; mon=months; wk=week.





Supplementary figure 2. Satisfactory response in Per-Protocol population