## Appendix A. Supplementary data



The following are the supplementary data related to this article:

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Fig. S1. Cortical thickness change corresponds to clinical improvement across different smoothing kernels. The main result of Fig. 1 is present regardless of smoothing kernel used, with 10 mm and 20 mm shown in A. and B. Peak findings are significant at P < 0.001.



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Fig. S2. Main finding from Figure 1 with 2 bipolar II patients removed from the analysis (N=43). A cortex-wide analysis revealed a significant correlation between cortical thickness change in left rostral anterior cingulate cortex (rACC) and improvement in depression symptoms. B. Average cortical thickness changes within this rACC region differ between responders and non-responders (+0.074 and -0.082 mm, respectively; P = 0.06) with non-responders showing a significant reduction in cortical thickness (P < 0.001). C. A scatter plot shows the correlation between changes in cortical thickness within this ROI with clinical response (r = 0.36, P = 0.01). \*\*\* P < 0.001.



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Fig. S3. **Main finding from Fig. 1 at a higher statistical threshold.** The main finding in **Fig. 1** is displayed with a higher statistical threshold of P < 0.001.



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Fig. S4. Cortical thickness change is correlated with clinical improvement in both cohorts. Scatter plots show the correlation between cortical thickness changes with clinical improvement. Values were extracted from the peak coordinate of the group analysis (Fig. 2C, black dot). Panel A shows data from Cornell (r = 0.53, P < 0.01) and B shows data from BIDMC (r = 0.47, P = 0.035).



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Fig. S5. Pretreatment cortical thickness is correlated with eventual clinical outcomes across different smoothing kernels. The main result of Fig. 3 is displayed using alternate smoothing kernels of 10 mm and 20 mm shown in A. and B.